PRQFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G73232

STEVEN H. MEZER, P.A.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90022 019 ***150.00



Principal Place	e of Business	Mailing Address					:			
C/O STEVEN H	. MEZER	C/O STEVEN H. MEZER				ľ				
1212 COURT STREET. SUITE B		1212 COURT STREET, SUITE B								
CLEARWATER FL 34616		CLEARWATER FL 34616				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 12/05/1983				
2 Principal P	lace of Business	2a. Mailing Address				4, FEI Number		Applie	d For	1.
		26				59-2368350	H	<u> </u>	pplicable	1:
Suite, Apt.	# atc	Suite, Apt. #, etc.					\$8.7	5 Add		ţ:
	m, etc.	27			•	5. Certifcate of Status Desired 🗀 🗆		e Requi		ļ
22		City & State				2 51 11 20 11 51 11/11				1
City & State	•	\vdash				6. Election Campaign Financing		00 Ma led to F	•	1
23		Zip Country				Trust Fund Contribution		eutor	665	1
Zip	Country	¬ '				8. This corporation owes the current year Intangible Personal Property Tax. Yes No				
24	25	1771	10			Personal Property Tax.			NO	┨
	9. Name and Address of Current			B1 P	NI	10. Name and Address of New Registered	Agent			1
1457	ED STEVEN H ESO			י ויי	Name					
	ER, STEVEN H. ESQ.		8	82 5	Street Addre	ess (P.O. Box Number is Not Acceptable)				1
	COURT ST., SUITE B					i ng gran i ngaloben pang nga <u>jangkono</u> n	915 F F 7	1221	-1 <u> </u>	1
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11 Pursuant	to the provisions of Sections 607.0502	2 and 607.1508. Florida Statutes	s, the abo	ove-n	named corpo	pration submits this statement for the purpose of	changing	g its reg	jistered	1
office or r	egistered agent, or both, in the State	of Florida. Such change was auti	horized b	by the	e corporatio	pration submits this statement for the purpose of n's board of directors. I hereby accept the appoir	ntment a	s regist	ered	
V⊆Nagent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florid	ia Statut	es.						
SIGNATURE		NOTE: B				when reinstating) DATE				
40	Signature, typed or printed name of registered agent OFFICERS AN		13.	fleur si	ignature reduted	ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	CTORS	IN 12	1
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			1					•		
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS