

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H32963 (1)
1. Corporation Name
PROFUNDO, INC.



Principal Place of Business Mailing Address
3939 CHEVAL BLVD 3939 CHEVAL BLVD
LUTZ FL 33549 LUTZ FL 33549

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		12/06/1984	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2468947	
24 Country		29 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired	
				8.75 Additional Fee Required	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	
				Yes No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RICH, JOSEPH. F. 3939 CHEVAL BLVD LUTZ FL 33549				81 Name James STACKPOOLE			
				82 Street Address (P.O. Box Number Is Not Acceptable)			
				3939 CHEVAL BLVD			
				83			
				84 City TAMPA			
				FL 85 Zip Code 33549			

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	STACKPOOLE, JAMES, M	1.2 NAME	BERG, JAN
STREET ADDRESS	3939 CHEVAL BLVD	1.3 STREET ADDRESS	3939 CHEVAL BLVD
CITY-ST-ZIP	LUTZ FL	1.4 CITY-ST-ZIP	TAMPA, FL 33549
TITLE	D	2.1 TITLE	
NAME	SIGALL, MICHAEL	2.2 NAME	
STREET ADDRESS	3939 CHEVAL BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	
NAME	RICH, JOSEPH F.	3.2 NAME	
STREET ADDRESS	3939 CHEVAL BLVD	3.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	LILJEQUIST, RUNE	4.2 NAME	
STREET ADDRESS	3939 CHEVAL BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	SVEDIN, BJORN	5.2 NAME	
STREET ADDRESS	3939 CHEVAL BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(l), 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.

SIGNATURE: *[Signature]* 9/30/98

CR2E034 (5/98)