FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J19642

PROFILES PLUS, INC.

FILED									
Apr 17 1997 8:00am									
Secretary of State									

Principal Place	e of Business	Mailing Address								
29296 U.S. 19		29296 U.S. 19								
SUITE 205		SUITE 205								
CLEARWATER I	FL 34621	CLEARWATER FL 34621-2	2189							
						3. Date Incorporated or Qualified				
						06/06/1986	05/0	1/1996		
2. Principal P	2a. Mailing Address	Mailing Address			4. FEI Number		7	Applied For		
21 26						59-2705208			ot Applicable	
Suite, Apt	#. eta.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			E Cartificate of Control Desired		\$8.75	Additional	
22		27	27			5. Certificate of Status Desired	سا	Fee F	Required	
City & State	0	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28	28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Cour			8. This corporation has liability for	ntangible t	ex under	s. 199.032	
24	25	29	30							
	g. Name and Address of Current Registered Agent			T		10. Name and Address of New Re				
CHE	FEE, DAVID			81	Name					
	MARQUITA DRIVE				ļ.,					
	IEDIN FL 34698			82	Street A	ddress (P.O. Box Number is Not Acceptab	le)			
DUN	IEUIN FL 34096			83	 					
				ြီ	İ					
				84	City			85 Zip	Code	
				<u> </u>	Ĺ		FL			
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the a	bove	-named c	corporation submits this statement for the p	urpose of (hanging	its registered	
onice or r agent La	egistered agent, or boln, in the Stat m familiar with, and accept the obli	e of Florida. Such change was gations of, Section 607,0505, F	aumorize Iorida Sta	tutes	∵tne corpo 3.	oration's board of directors. I hereby accept	or the appo	ınımenı a	s registered	
SIGNATURE		g								
SIGNATURE	Stig- afore, typed or printed name of registered as	gent and title if applicable. (NC	TE: Registere	d Age	nt signature t	equired when reinstating)	DATE			
12.	OFFICERS AI	ND DIRECTORS	13.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTO	RS IN 12	
TITLE	D	DELETE	111	ITLE				Change	Addition	
NAME	SCHWALJE, GERARD R.		1.2 N	IAME						
STREET ADDRESS 3150 TIMBERVIEW DR			4		ADDRESS					
CHTY-\$1-ZIP		1.4 Crty-St-ZiP								
TITLE	DUNEDIN FL DP DELETE				1-217			Change	Addition	
	CUFFE, DAVID		2.1 TITLE 2.2 NAME				'			
NAME										
STREET ADDRESS	2174 MARQUITA DR		23 S	TREET	ADDRESS					
CHTY-ST-ZIF	DUNEDIN FL		2 4 (CITY-S	ST-ZIP					
THILE	DELETE			ITLE		· ·	7	Change	Addition	
NAME	BELKO, GERALD F.		32 N	IAME						
STREET ADDRESS	474 OAKDALE		335	TREET	ADDRESS					
CITY-ST-ZIP	GLENCOE IL		34.0	CITY-S	ST-ZIP					
TITLE	V	DELETE	41 T			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Change	Addition	
NAME	PRIEST, SUSAN C		4.21	NAME						
STREET ADDRESS	1987 LYNNWOOD CT				ADDRESS					
CITY-ST-ZIP	DUNEDIN FL 34698			ITY-S	1					
TITLE	DOIALDIN I E GAOOG	DELETE	51 T		1-24			Change	Addition	
		F-1 OFFER			1		'	Cumillo	, women	
NAME			52 N						i	
STREET ADDRESS					ADDRESS				ļ	
CITY - ST - ZIP				ITY-S	T-ZIP			7 0/		
TILE		☐ DELETE	6.1 T	ITLE			,	Change	Addition	
NAME			6.2 N	IAME	ŀ				İ	
STREET ADDRESS			638	TREET	ADDRESS					
CITY ST-ZIP			6.4 C	ITY-S	71-21P					

14. I do 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.

SIGNATURE:

SUBAN C. Priatt Suban C. Priest V.P. 1/3/96 813-786-4000