## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PRCFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(0)

1. Corporation	DAST AUTO STRIPING, INC	ν- /			E ARANIKA BIRA JAPAR INIKA KROBA NANI	68)( 81 <del>8</del> )( 8(8)) 8		
Principal Place of Business		Mailing Address						
% ALAN S. GASSWAN 100 - 34TH STREET NORTH #305 ST PETERSBURG FL 33713-8539		% Craig P. Moore 100 - 34th Street North #305 St Petersburg FL 33713-8539		•				
		US	710-0303		<ol> <li>Date Incorporated or Qualified 07/20/1987</li> </ol>	3a. Date o	f Last Re 01/199	
ı	ace of Business	2a. Mailing Address			4, FEI Number			Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-2826854			Not Applicable
22		27		5. Certificate of Status Desired		-	Additional Required	
City & State	9	City & State			6. Election Campaign Financing			
23		28		Trust Fund Contribution			O May Be d to Fees	
Zip	Country	Z(p	Country		8. This corporation has liability for i			
24	9. Name and Address of Curren	29 30			Florida Statutes Yes No			
	9. Name and Address of Curren	r registered Agent	81 Name	<u> </u>	10. Name and Address of New R	egistered Ag	ent	
MOORE	CRAIG P.							
	TH STREET NORTH, #305		82 Stree	t Addre	ss (P.O. Box Number is Not Acceptab	le)		
	ERSBURG FL 33713		83					
			84 City			FL	<b>85</b>   Ziç	o Code
Or register	to the provisions of Sections 607.0502 ed agent, or both, in the State of Florioth, and accept the obligations of, Section 1.	ia. Sucri change was authorize	s, the above-named of by the corporation	corpora s board	tion submits this statement for the pur of directors. I hereby accept the appo	pose of chang pintment as re	ing its re gistered	egistered office agent. I am
	Signatura, typed or printed name of registered agent of		- Registered Agent signature	required r		DATE		
12.	OFFICERS AND	DIRECTORS  DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFI			
NAME	HOFMANN, SETH A.	☐ biccie	1 1 TITLE		•	L	Change	Addition
STREET ADDRESS	7728 - 17TH WAY NORTH		1.2 NAME 1.3 STREET ADDRESS	. [				
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-ST-ZIP	'				
TITLE	D	☐ DELETE	2 1 TiTLE	+			Change	Addition
NAME	HOFMANN, TONOAH D.		2 2 NAME	ŀ				
STREET ADDRESS	7728 - 17TH WAY NORTH		2 3 STREET ADDRESS	.				
CITY-ST-ZIP	ST. PETERSBURG FL		2 4 CITY - ST-ZIP					
TITLE		□ DELETE	3 1 TITLE				Change	☐ Addition
NAME			32 NAME					
STREET ADDRESS			3.3. STREET ADDRESS	6				
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4. 1 TITLE				Change	F7 Addition
NAME		La Decerte	4.2 NAME			LJ '	Change	☐ Addition
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-S1-2IP			4.4 CITY-ST-ZIP					
TITLE		☐ DELE1E	5. 1 TITLE	<del> </del> -			Change	Addition
NAME			5.2 NAME	1				
STREET ADDRESS			5.3 STREET ADDRESS	1				
CITY - ST - ZIP			5.4 C(TY - ST - Z(P	<u> </u>				
TITLE		☐ DELETE	6. 1 TITLE	1			Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
14. I do hereby	y certify that the information supplied w	ith this filing is voluntarily furgic	6.4 CITY-ST-ZIP	lalify for	the exemption stated in Section 110.0	7/21/1/ 51222	Ctot. d	an I fuelber
oath; that I	the information indicated on this annual am an officer or director of the corpor Block 12 or Block 13 if changed, or or	al report or supplemental annua ation or the receiver or trustee	al report is true and a empowered to execu	ccurate ote this	and that my signature shall have the seport as required by Chapter 607, Flo	ame legal efferida Statutes;	oct as if	made under t my name

SIGNATURE