

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN -8 AM 10:35

DOCUMENT # K12200

(7)

1. Corporation Name

PROFITABLE SALES ASSOCIATES, INC.

Principal Place of Business

7602 ST ANDREWS RD
LAKE WORTH FL 33467-8208
US

Mailing Address

7602 ST ANDREWS RD
LAKE WORTH FL 33467-8208
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/11/1988

3a. Date of Last Report

05/11/1994

4. FEI Number

65-0040460

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 7583 ST Andrews Rd

2a. Mailing Address

26 7583 ST Andrews Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Lake Worth FL

City & State

28 Lake Worth FL

Zip

24 33467-1318

Country

25 US

Zip

29 33467-1318

Country

30 US

9. Name and Address of Current Registered Agent

BERRIS, JAMES P
7602 ST ANDREWS RD
LAKE WORTH, 33467-8208

10. Name and Address of New Registered Agent

81 Name

James P. BERRIS

82 Street Address (P.O. Box Number is Not Acceptable)

7583 ST Andrews Rd

83

84 City

Lake Worth

FL

85 Zip Code

33467

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 of officer or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

6-5-95

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BERISH, NICHOLAS P.
4780 CRESTHAVEN BLVD #D
W PALM BEACH FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
BERRIS, JAMES P.
7602 ST. ANDREWS ROAD
LAKE WORTH FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☒ Change ☐ Addition

7583 ST Andrews Rd

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

James P. BERRIS

6-5-95 407 969 0137

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

CR2E034 (3/95)