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

PRÖFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

K44542

(4)

CYNGO INTERNATIONAL CORPORATION

Principal Place of Business Mailing Address				E samiffelt ärt bamel anden Ariet damen vidt Alb	i bibis asasi 21811 atam atam 1481	
6830 CENTRAL AVENUE 6830 CENTRAL		6830 CENTRAL AVENUE				
B OT OFTENOMING EL GOTOT		B or percocours at 22202		DO NOT WRITE IN 1	DO NOT WRITE IN THIS SPACE	
		ST PETERSBURG FL 33707	3. Date Incorporated or Qualified		THOOF NOE	
00		00		11/10/1988		
2. Principal Pl	lace of Business	2a. Mailing Address		4 FEI Number	Applied For	
21 7746-66 TH ST. N. 26 7746-66			TH ST. N	59-2922667	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
27				6. Certificate of Status Desired	Fee Required	
City & State Cyy & State			Page 1	6. Election Campaign Financing	\$5.00 May Be	
	LLAS PARK, FL	28 MINELLAS	MARK, F.	Trust Fund Contribution	Added to Fees	
Zip .	Country	zip 29 33781 30	Country	This corporation owes or has paid th		
24 <i>337</i>		29 3773/ 30	PINECLAS	Personal Property Tax due June 30.	Yes No	
				10. Name and Address of New Registe	10. Name and Address of New Registered Agent	
JUNES, MARTIN S.						
6830 CENTRAL AVE 82 Street Address (P.O. Box Number is Not Acceptable)						
SUITE B ST DETERMINA EL 20707						
ST. PETERSBURG FL 33707						
84 CITYINELLAS PARK FL 85 ZIP Code 337281						
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, typed or printed name of registered agent and telle if applicable INOTE: Registered Agent signature 12. OFFICERS AND DIRECTORS 13.			quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	OF FICERS AND I	DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition	
NAME	GOEBEL, CYNTHIA A.				Change Chauditon	
	6830 CENTRAL AVE SUITE B		1.2 NAME	DOWN LITE A	1	
STREET ADDRESS	ST. PETERSBURG FL		1.3 STREET ADDRESS	PINIELLAS PARIL	E 22701	
CITY+\$T-ZIP TITLE	31. FEIENSBORG TE	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	PINIELLAS PHILIE, I	Change Addition	
NAME		L. Dittie	2.2 NAME		C Ondings C reduitor	
STREET ADDRESS			2.3 STREET ADDRESS			
			2.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	2. 4 CHY-51-2IP		Change Addition	
NAME			3.2 NAME		C Charge C radition	
STREET ADDRESS			3.3 STREET ADDRESS			

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.

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

4.1 TITLE 4 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

DELETE

DELETE

DELETE

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY - \$T - ZIP

CITY-ST-ZIP

TITLE

TITLE

NAME

TITLE

NAME

2/22/58

VUTUIA (SOEBEL

Change

Change

Change

Addition

Addition

FILED

Mar 30 1998 8:00am

Secretary of State