

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 # K93737 (0)
1. Corporation Name
PROST, INC.

APPROVED AND FILED pg 1 of 2
97 JUL -3 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
247 SW 3RD AVENUE
2410 N E 33RD ST.
FORT LAUDERDALE FL 33312
US

Mailing Address
% JUDITH SELESNICK
2410 N E 33RD ST.
LIGHTHOUSE POINT FL 33064-8143

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/08/1989		3a. Date of Last Report 04/16/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 65-0126414		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

SELESNICK, JUDITH
2410 N E 33RD ST.
LIGHTHOUSE POINT FL FL 33064

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SELESNICK, JUDY	1.2 NAME	100002235281--8
STREET ADDRESS	2410 N.E. 33RD ST.	1.3 STREET ADDRESS	-07/10/97--01090--013
CITY-ST-ZIP	LIGHTHOUSE PT. FL	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 _____ 6/30/97 954-946-1657

CR2E034 (9/96)

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Garry P. Geertsma Accountant
200 W Camino Real # W
Boca Raton, Fla. 33432
(561) 362-9490 Ph & Fax

June 30, 1997

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Fla. 32314

Attached is the late filed 1997 annual report for Prost INC. . Please excuse the late filing and abate any late penalties.

Prost INC. is a closely held corporation, owned and operated by a single individual. The individual greatly relied on her accountant for compliance and administration in the past. The taxpayers prior accountant suffered a stroke last year. The illness put the accounting office in complete kaos. As a result the taxpayer is deliquent on many of the required filing documents. Last month the client was referred to me. I have contacted the prior accountant many times for information. I only recently received the attached document. Since I will be filing all the future tax returns this will not happen next year.

The corporation is operating under a loss and any penalties will create an undue hardship.

Thankyou for understanding this situation.


Garry P. Geertsma EA