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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K93737 (0)

1. Corporation Name
PROST, INC.



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
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3. Date Incorporated or Qualified 06/08/1989	3a. Date of Last Report 04/16/1996
4. FEI Number 65-0126414	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 Zip	25 Country
29 Zip	30 Country

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
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

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SELESNICK, JUDY	
STREET ADDRESS	2410 N.E. 33RD ST.	
CITY-ST-ZIP	LIGHTHOUSE PT. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	100002235281--8
1.3 STREET ADDRESS	-07/10/97--01090--013
1.4 CITY-ST-ZIP	****165.00 ****165.00
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

A. Alan
7/3/97

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: *Sandra B. Mortham, P.M.* *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