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PRÓFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90070 023 ***150.00

DOCUMENT # L57880

1. Corporation Name

S & N WASSERMAN P.A. Principal Place of Business

Mailing Address

670 NE 172ND TERRACE 670 NE 172ND TERRACE N. MIAMI BCH. FL 33162 N. MIAMI BCH, FL 33162 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/12/1990 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Not Applicable 65-0183958 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible □No 30 Personal Property Tax. 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent WASSERMAN, STEVEN Street Address (P.O. Box Number is Not Acceptable) 82 670 NE 172ND TERRACE N. MIAMI BCH. FL 33162 83

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.

84 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required who ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITLE WASSERMAN, STEVEN 1.2 NAME NAME 670 NE 172ND TERRACE 1.3 STREET ADDRESS STREET ADDRESS N. MIAMI BCH. FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ Addition Change DELETE 2.1 TITLE TITLE 22 NAME WASSERMAN, NERY NAME 670 NE 172ND TERRACE 2.3 STREET ADDRESS STREET ADDRESS N. MIAMI BCH. FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-71P Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)

Zip Code