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FILED

Feb 28 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N96000002218 (3)

1. Corporation Name

PROPHETIC POSSIBILITIES, INC.



Principal Place of Business

Mailing Address

1215 S.W. 99TH COURT  
MIAMI FL 33174

1215 S.W. 99TH COURT  
MIAMI FL 33174-2821

3. Date Incorporated or Qualified  
04/19/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Same as above →  
Suite, Apt. #, etc.

26 11762 NO. KERRAULT DR.  
Suite, Apt. #, etc.

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIEZ, SANTIAGO ESO  
1401 BRICKELL AVENUE #500  
MIAMI FL 33131

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME ATKINS, BILL  
STREET ADDRESS 1215 S.W. 99TH COURT  
CITY - ST - ZIP MIAMI FL 33174

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME ADKINS  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

TITLE D ☐ DELETE  
NAME GOLDBERG, STAN  
STREET ADDRESS 4301 RICKENBACKER CAUSEWAY  
CITY - ST - ZIP MIAMI FL 33149

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

TITLE D ☐ DELETE  
NAME SISMANIDIS, LETICIA  
STREET ADDRESS 11125 SW 132ND COURT APT. #4  
CITY - ST - ZIP MIAMI FL 33186

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

TITLE D ☐ DELETE  
NAME MENDOLA, RON  
STREET ADDRESS 26543 SW 122ND PLACE  
CITY - ST - ZIP PRINCETON FL 33032

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

TITLE D ☒ DELETE  
NAME DIEGUEZ, EDWARD  
STREET ADDRESS 7831 SW 89TH COURT  
CITY - ST - ZIP MIAMI FL 33173

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0032648

CR2E037 (9/96)