## 2004 FOR PROFIL CORPORATION ANNUAL REPORT

## Mar 29, 2004 08:00 AM Secretary of State DOCUMENT # P93000027861 1. Entity Name J & L ENTERPRISES OF ORLANDO, INC. Principal Place of Business Mailing Address 9550 SATELLITE BLVD 9550 SATELLITE BLVD. SUITE 100 SUITE 100 ORLANDO, FL 32837 ORLANDO, FL 32837 03162004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3174528 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARTEN, JOHN D DO NOT WRITE 9550 SATELLITE BLVD SUITE 100 IN THIS SPACE ORLANDO, FL 32837 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and tide if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME GARTEN, JOHN D STREET ADDRESS 1631 WIND WILLOW ROAD CITY-ST-ZIP ORLANDO, FL 32809 HILE U00000098685 03/23/04-80050-018 158.75 NAME STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 russing empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED