FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PRQFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000035807 (5)

DESTIN FENCE COMPANY, INC.

FILED May 01 1998 8:00am Secretary of State

|--|

Principal Place of Business Mailing Address						
C/O MARK C.		C/O MARK C. STATON				
870 A COUNTYLINE RD. NICEVILLE FL 32578		579 A COUNTYLINE RD. NICEVILLE FL 32578			DO NOT MORE IN THIS SOACE	
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					05/17/1993	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		59-3196022	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		-	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the co	urrent year Intangible
24	25	29	30			☐ Yes ► No
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered	i Agent
STA	NTON, MARK C		81	Name		
811	LINDEN AVE.		82	Street Add	fress (P.O. Box Number is Not Acceptable)	
NIC	EVILLE FL 32578		٦	Olicel 7100	(1.0, box Hamber is Not Accordate)	
			83			
			-	0.		
			84	City	FI	85 Zip Code
office or reagent I as	ogistered agent, or both, in the State m familiar with, and accept the obliga-	of Florida Such change was a ations of, Section 607.0505, Flo	uthorized b rida Statute	y the corpora s.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	or changing its registered
O CONTROLL	Signature, typied or printed name of registered again	est and title diapplicable (NOTE	Registered Ag	ent signature requ	ired when reinstating) DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	P ATTON MADY O	DELETE	1.1 THEE	ĺ		☐ Change ☐ Addition
NAME	STATON, MARK C		1.2 NAME			
STREET ADORESS	811 LINDEN AVE.		1.3 STREE	T ADDRESS		Įį
CITY-ST-ZIP	NICEVILLE FL 32578		1,4 CITY - :	S1-ZIP		
TITLE	About the transfer of the tran	☐ DELETE	2.1 TITLE	}		☐ Change ☐ Addition
NAME	RODGERS, CHARLES A		2.2 NAME			
STREET ADDRESS	613 31ST STREET		23 STALE	r address		i
CITY-ST-ZIP	NICEVILLE FL 32578		2 4 CITY-	ST-ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	1 ADDRESS		İ
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	1		☐ Change ☐ Addition
NAME			4. 2 NAME			İ
STREET ADDRESS			4.3 STREET	F ADDRESS		
CITY-ST-ZIP			4.4 CITY - 5	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME.]
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-5	S1 - ZIP		
TITLE		DELETE	61 TITLE	T		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - 5	ST-ZIP		

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 of 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 one a start ment with an address.

4-12-90