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

PRÓFIT
CORPORATION
ANNUAL REPORT

1997

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME



FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

Change

Wholen him

■ Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000061276 (0)

INTERNATIONAL MOTOR SERVICE OF WINTER PARK, INC.

Principal Place of Business Mailing Address 2180 W FAIRBANKS AVE 5030 HARKLEY RUNYAN RD WINTER PARK FL \$2789 ST. CLOUD FL 34771-9538 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1993 07/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3199293 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 TATTOLI, MICHAEL T 2180 W. FAIRBANKS AVE 82 Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32789 83 City 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) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change ☐ Addition TITLE 1h TITLE TATTOLI. MICHAEL T 1 b NAME NAME **5030 HARKLEY RUNYAN ROAD** STREET ADDRESS 1 & STREET ADDRESS ST. CLOUD FL 1 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2h TITLE TITLE TATTOU, MICHAEL T 22 NAME NAME **5030 HARKLEY RUNYAN ROAD** 23 STREET ADDRESS STREET ADDRESS ST. CLOUD FL CITY-ST-ZIP 2, 4 CITY - ST - ZIP DELETE Change ___ Addition 31 TITLE TITLE 32 NAME NAME 3/3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 4 TITLE NAME 4, 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4,4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5,3 STREET ADDRESS STREET ADDRESS

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 eath; 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.

5.4 CITY - ST - ZIP

6,4 CiTY-ST-ZIP

6,1 THILE

6,2 NAME 6,3 STREET ADDRESS

DO MATON AND COUNTY

DELETE