

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED

1995 AUG -3 AM 9:18

TALLAHASSEE, FLORIDA

DOCUMENT # P93000080856 (6)

1. Corporation Name

PROFI INVESTMENT, INC.

Principal Place of Business

% WALTER J. REMHOF
#204
CAPE CORAL FL 33904
US

Mailing Address

% WALTER J. REMHOF
#204
CAPE CORAL FL 33904
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/23/1993

3a. Date of Last Report
05/01/1994

4. FEI Number
65-0474246

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21. 1314 E. Cape Coral Pkwy

22. Suite, Apt. #, etc.
#204

23. City & State
Cape Coral, FL

24. Zip
33904

25. Country
USA

2a. Mailing Address

26. c/o Walter Remhof

27. Suite, Apt. #, etc.
#204

28. City & State
Cape Coral, FL

29. Zip
33904

30. Country
USA

9. Name and Address of Current Registered Agent

REMHOFF, WALTER J
1314 E. CAPE CORAL PARKWAY
CAPE CORAL FL 33904

10. Name and Address of New Registered Agent

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 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

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
DP
HOPF MICHAEL
% 1314 E. CAPE CORAL PARKWAY
CAPE CORAL FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
STD
HOPF KIRSTEN
C/O 1314 E CAPE CORAL PKWY #204
CAPE CORAL FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
V
REMHOFF WALTER J
1314 E CAPE CORAL PKWY #204
CAPE CORAL FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter J. Remhof

4-28-95