

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P94000018001

1. Entity Name

PRO-JECT INTERNATIONAL, INC.



Principal Place of Business

320 W. KENNEDY BLVD.
SUITE 200
TAMPA, FL 33606 US

Mailing Address

320 W. KENNEDY BLVD.
SUITE 200
TAMPA, FL 33606 US

DO NOT WRITE IN THIS SPACE

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90042 019 ***150.00



04042007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3249405

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MULLER, ERIC E
320 W. KENNEDY BLVD
SUITE 200
TAMPA, FL 33607-5415

DO NOT WRITE
IN THIS SPACE

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MULLER, ERIC E
STREET ADDRESS	320 W. KENNEDY BLVD. # 200
CITY - ST - ZIP	TAMPA, FL 33606

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 trustee 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-10-07

813-251-0388