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

Mailing Address

6512 LAMP POST DR

TAMPA FL 33625-4977

PROFIL CORPORATION ANNUAL REPORT

1997

Principal Paide of Business

6512 LAMP POST DR

TAMPA FL 33625



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # **P94000045213 (3)**

DOUBLE A TILE AND MARBLE, INC.

06/10/1994 02/02/1996 2. Procapal Proce of Business 2a. Mailing Address 4. FEI Number Applied For 59-3254693 26 Not Applicable Saite, Apt. #Lefe Suitc, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 $Z_{\rm ID}$ Country 8. This corporation has liability for in angible tax under s. 199.032, Yes 🗀 No Florida Statutes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DOSAL, ALLEN R SR 6512 LAMP POST DR Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33625** 83 84 Cily Zip Code 11. Pursured 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 for 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. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE TAC Styres as the Committee of the protection of the Albertappi about (NOTE_flogistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. [...] DELFTE Change Addition 1.1 TITLE Title DOSAL, ALLEN R SR MAM 1.2 NAME 6512 LAMP POST DR STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33625 CHY ST 245 1.4 CHY-ST-ZIP DELETE Change Addition HI;E 2.1 TITLE DOSAL, ALLEN R JR 2.2 NAME NAME 12311 HIDDEN BROOK DRIVE 23 STREET ADDRESS STREET ADDRESS **TAMPA FL 33625** CHY-SI Zet 2 4 CHY-ST-ZIP DELETE Change Addition Bliff 3 1 71716 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS DILY ST Ze 3.4 CITY - ST - ZIP DELETE CoitibbA Change TILE 4.1 1111.6 4. 2 NAME NAME STREET ADDIRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CD v - S1 - Z0 DELFTE Change Addition THE 5.1 TITLE 5.2 NAME SHELL ADOREST 5 3 STREET ADDRESS OTY-ST ZIE 54 CITY-\$1-ZIP DELETE Change Addition 61 HILE

SIGNATURE: JOANNA DOSAL

TITLE NAMI

STREET ACCORDING IN

COY SE 202

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

14. Lido morehy comby 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 includates on this annual report or suppliemental 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 a neutro of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changed, or on an attachment with an addysss.

FILED

Mar 20 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified