## 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** # P95000025238 (3)

COMATRIX SOUTHEAST, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

## **FILED** Feb 27 1998 8:00am Secretary of State



2952 NW 60TH STREET FT LAUDERDALE FL 33309		2952 N.W. 60TH STREET FT LAUDERDALE FL 33309			
US				DO NOT WRITE IN THIS	SPACE
				<ol> <li>Date Incorporated or Qualified</li> <li>03/29/1995</li> </ol>	
Z. Principo	TARITUGS XITTER TARY	28. Mailing Address		4. FEI Number	Applied For
21 00	52.N.W. 60th ST.	26 Scame		65-0581894	Not Applicable
22 FT. LAUDERDALE, FL 33309		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25		90		☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent	041	10. Name and Address of New Registered	Agent
HERRERA, MARTIN A				Wlastin A. Herre	5h
2952 N.W. 60TH STREET			B2 Street A	Address (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33309			B3 17 Q	11 - 11 - 11 - 11	
			2 7 V	27 W.M. POW 94	
<del> </del>			84 dis	it Lunderdale Fl	- 85 Zin Code 9
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 rejustered 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 chiligations of, Section 607.0509 Florida Statutes.					
SIGNATURE	Law Aller	Vicelas	Lands.	19-98	
	Signature, typod or printed name of registered agen		Registered Agent signature r	equired whon roinstating) DATE	
12.	1 OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	V MEDDEDA AAADEMI A	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HERRERA, MARTIN A		1.2 NAME		
STREET ADDRESS	2952 N.W. 60TH STREET		1.3 STREET ADDRESS	•	İ
CITY-ST-ZIP	FT LAUDERDALE FL 33309	The state	1.4 City-St-ZiP		
TITLE	PACHELLI, MICHAEL	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	2952 N.W. 60TH STREET		2.2 NAME	Section 2015	
STREET ADDRESS	FT LAUDERDALE FL 33309		2.3 STREET ADDRESS	·	
CITY-ST-ZIP TITLE	n	DELETE	2 4 CITY - ST - ZIP		Charac L Addition
NAME	SILVER, NORMAN	La print	3.1 TATLE		L. Change . Addition
STREET ADDRESS	1628 130TH AVE NE		3.2 NAME		41
CITY-ST-ZIP	BELLEVUE WA 98005		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TITLE		Change Addition
NAME	BERNSTEIN, ROBERT J		4. 2 NAME		visings riboriti)
STREET ADDRESS	1711 E ASH AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	FULLERTON CA 92631		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TOLE		Change Addition
NAME			5.2 NAME		_ ,
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP			5.4 CITY - ST - 2IP		
TITLE		DELETE	6.1 TITLE	1100	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		ľ
CITY-ST-ZIP			64 CITY - ST - ZIP		
Indicated (	on this atinuat report or supplemental.	annual report is true and accura	ate and that my sign:	in Section 119.07(3)(i), Florida Statutes. I further co	odor ooth: that I am on
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 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 the product of the receiver of the receiver of the receiver or trustee and that my name appears in Block 12 or Block 13 if the product of the receiver of the					
Block 12 or Block 13 if changed, or on an attachment with an address seek					