CORPORATION ANNUAL REPORT



Secretary of State DIVISION OF CORPORATIONS

FILED FILE NOW: FILING FEE AFTER MAY 119 \$550.00 Apr 28 1997 8:00am FLORIDA DEPARTMENT OF STATE Secretary of State Sandra B. Mortham 1997

DOCUMENT # P95000034815 (7) PROFIT OPTIMIZATION STRATEGIES, INC. Principal Place of Business Mailing Address 1370 S OCEAN BLVD 1370 S OCEAN BLVD POMPANO BEACH FL 33062 POMPANO BEACH FL 33062-7140 3. Date Incorporated or Qualified 3a. Date of Last Report 05/03/1995 09/04/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 4, FEI Number 21 65-0582814 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes 🔲 No 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent Name PINCHUK, STEVEN C 1370 S OCEAN BLVD Street Address (P.O. Box Number is Not Acceptable) #2802 83 POMPANO BEACH FL 33062 84 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 of 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, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Stocator, Types or priced from of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE me 11 TITLE Change Addition PINCHUK, STEVEN G NAME 1.2 NAME 1370 S OCEAN BLVD #2802 STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33062 011Y-31-70 1.4 CITY - ST-ZIP DELETE DILLE 2.1 TITLE Change Addition NAM: 2.2 NAME STREET ADORESS 23 STREET ADDRESS 007Y-51-70 2. 4 CITY-ST-ZIP DELETE THEE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 41 TITLE Addition MANE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-SI 4.4 CITY-ST-ZIP m.e DELETE 5.1 TITLE Change Addition NAME: 5.2 NAME STREET ADDRESS 53 STREET ADDRESS 09 y - St - Z 5.4 City-ST-ZIP 71116 DELETE 6.1 TITLE Change Addition NAMI 62 NAME STREET ADORESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Los 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 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:



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