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

**PROFIL** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P95000041780 (4)

1929 CORP.

Mailing Address

**FILED** Mar 31 1998 8:00am Secretary of State



Principal Place of Business % JEFFREY M. PERLOW 1820 E. HALLANDALE BEACH BLVD. % JEFFREY M. PERLOW 1820 E. HALLANDALE BEACH BLVD. DO NOT WRITE IN THIS SPACE HALLANDALE FL 33009 HALLANDALE FL 33009 3. Date Incorporated or Qualified 05/26/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0589055 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 26 Ζıp Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name PERLOW, JEFFREY M 1820 E. HALLANDALE BEACH BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) HALLANDALE FL 33009 83 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 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. Lam 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 reinstating) CR2E034 (10/97) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE Change Addition TITLE 1.1 TITLE NAME JUSKO, LAWRENCE 12 NAME 1820 E. HALLANDALE BEACH BLVD. STREET ADDRESS 1.3 STREET ADORESS HALLANDALE FL 33009 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Channe Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change ☐ Addition DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CATY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 arrival report strue 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 of 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 if changed, or qui an alarchy out with an address.

SIGNATURE: