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

PRÓFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000060072

	IN A. ROBERTS, P.A.	Mailing Address				
228 BROOKS		5 GARNIERS POST RD				
SUITE A	,	FT WALTON BEACH FL 325	47-1828			
	EACH FL 32548			DO NOT WRITE IN THIS SPACE		
US .				3. Date Incorporated or Qualifed 08/03/1995		
Principal Place of Business 2a. Mailing Address				4. FEI Number	Ap	plied For
21		26		59-3331206	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 / Fee Re	
City & State City & State 23 28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	- 1
Zip	Country	Zip	Country 30	This corporation owes the current year Personal Property Tax.		□No
	9. Name and Address of Curren		30,	10. Name and Address of New Registers		
			81 Name			
ROBERTS, FRANKLIN A			82 Street Ac	ress (P.O. Box Number is Not Acceptable)		
FT WALTON BEACH FL 32547-1828			83		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	32.0 (2.434) - 0.3 3 (2.434)
			63			
			84 City	F	85 Zip (Code
11 Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	es, the above-named co	prporation submits this statement for the purpose	of changing its	registered
office or i	registered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was au	thorized by the corpora	ation's board of directors. I hereby accept the app	ointment as re	gistered
SIGNATURE						
	Signature, typed or printed name of registered agen		Registered Agent signature requ			
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
	ROBERTS, FRANKLIN A		1.1 TITLE	√ 1 €		L] Addition
NAME STREET ADDRESS	5 GARNIERS POST RD		1.2 NAME 1.3 STREET ADDRESS			- (
	ET WAITON DEACH EL 20547 1000					1
CITY-ST-ZIP .		☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change	Addition
NAME		٠, ٧٢٢٥٠٢	2.2 NAME		C) Orlange	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP	\$14 £	المراجعين	2,4 CITY-ST-ZIP			İ
TITLE 2000	respect to the second	☐ DELETE	3.1 TITLE		Change	Addition
NAME	Little Committee (1995)		3.2 NAME			_
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CITY-ST-ZIP			3.4. CITY-ST-ZIP			
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STREET ADDRESS			4.3 STREET ADDRESS			ĺ
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		, DELETE	5.1 TITLE		Change	Addition
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STREET ADDRESS	6)		5.3 STREET ADDRESS			
CITY-ST-ZIP	Bertag British St. S.		5.4 CITY-ST-ZIP	 		
TILE,	SOME ENTER DE LE	☐ DELĒTE	6.1 TITLE		Change	☐ Addition {
NAME		(1.2%)	6.2 NAME			j
OTTOECT ADDRESS			6.3 STREET ANADESS			

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 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 of on an attact/prent with an address with all other like improvered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ATURE AND TYPED GREPRINTED NAME OF SIGNING OFFICER OF DIRECTOR

5/99 850 301 0444

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FILED

Jan 21, 1999 8:00am

Secretary of State 01-21-1999 90022 015 ***150.00

E034 (11/98