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

Mailing Address

PROFITY CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000068402 (3)

W.I. 2000 PROPERTY INVESTMENTS CORP.

% MARION LANG % MARION LANG 3500 ISLAND BLVD., PH 1 3500 ISLAND BLVD., PH 1 DO NOT WRITE IN THIS SPACE WILLIAMS ISLAND FL 33160 WILLIAMS ISLAND FL 33160 3. Date Incorporated or Qualified 08/26/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0609416 Not Applicable Sulte, Apt. #, etc Suite, 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 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Yax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KLEIN, ROBERT G KVEW) 2800 SOUTH OCEAN BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 2G 83 **BOCA RATON FL 33432** 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, both, in the State of Central 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 obligations of Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. D DELETE Change Addition 1.1 TITLE TITLE HOFMANN, THOMAS NAME 1.2 NAME 3500 ISLAND BLVD., PH 1 STREET ADDRESS 1.3 STREET ADDRESS WILLIAMS ISLAND FL 33160 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7IP 14. Thereby 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 life receive 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 panighd, given an other process.

GREST G. KIEW OD PA

dry 60