FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROF_IT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P95000075562 (5) DOCUMENT #

1. Corporation Name

. Corporation Name							
	ADONAI ASSOCIATES,	INC.					



		at has address					ADRI BILIDA BILID BILIDA 1800 TABA
Principal Place of		Mailing Address	•				
4341 SW 13TH			4341 SW 13TH AVE. CAPE CORAL FL 33914				
CAPE CORAL F	.F 33a14	ON E COINE ! E C				- I O- Fiel	te of Last Report
					3. Date incorporated or Qualific 09/28/1995		
						Neu	CORP 9/95 Applied For
2. Principal Place	e of Business	2a. Mailing Address			4. FEI Number (25 ~ 061	1418	Not Applicable
21		26			63.061	1 11 6	\$8.75 Additional
Suite Apt. #,	etc	Suite, Apt. #, etc			Certificate of Status Desired		Fee Required
22		27		- 5 Occasion Emproprie		\$5.00 May Be	
City & State		City & State			 Election Campaign Financing Trust Fund Contribution 		Added to Fees
23		28			8. This corporation has liability	for intangible	tax unger s 199.032
Zφ	Country	Zip	Count	ı y	Florida Statutes	Yes No	
24	25	29	30]		10. Name and Address of Ne	w Registerer	d Agent
	9. Name and Address of Curre	ent Registered Agent		1 Name			
ATE: #14	TANE M						
STEVENS	, JANE M		Εŧ	Street Add	ress (P.O. Box Number is Not Acce	prable;	Ì
	13TH AVE.		-	33			
CAPE CO)RAL FL 33914		\	~			
			1	34 City		F	85 Zip Code
					ration submits this statement for the ard of directors. Thereby accept the	a purpose of c	sharroing its registered office
SIGNATURE .	d agent, or both, in the State of Fik, and accept the obligations of, Se	intalative dames are	IN TE BOOKUGE	CAL Gent separation corpor	ADDITIONS/CHANGES TO	ØA1£	24/96 ND DIRECTORS IN 12
12.	OFFICERS A	AND DIRECTORS DELETE					Change Addition
TITLE	STEVENS, JANE M	L., Directi	1.2 NA	l			
NAME	4341 SW 13TH AVE.			HEET ADDRESS			
STREET ADDRESS	CAPE CORAL FL 33914			Y SI-ZIP			
CITY-ST-ZIP		☐ DELETE					Change Addition
TITLE		Полек	2 2 NA	i			
NAME				HEET ADDRESS			
STREET ADDRESS				TY - ST - ZIP			
CITY - ST - ZIP		T DELETE					Change Addition
TITLE		Поссен	32 N	•			
NAME				TREET ADDRESS			
STREET ADDRESS			1	TY-ST-ZIP			
CITY-ST ZIP		[] DELETE					☐ Change ☐ Addition
TITLE		<u></u>	42 N				
NAME				TREET ADDRESS			
STREET ADDRESS				iTY+SI-ZiP	200001	8221	563
CITY - S1 - ZIP		DELET			300001 -05/15/96	-01054	Change Addition
TITLE		_ 5524	5 2 N		***200.00	Q100 i	 '
NAME				THEET ADDRESS	<u>ቀ</u> ሎም <u>ር</u> ሀሀኔ ሀሀ		
STREET ADDRESS				ITY - ST - ZIP			
CITY - ST - ZIP		DELET					☐ Change ☐ Addition
TITLE			€21	1			25.1
NAME				THEET ADDRESS			- 5.1
STREET ADDRESS				CITY - ST-ZIF			
CITY-ST-2IP			t 4 L	411-31-2lt	by for the exemption stated in Section	n 119 07(3)(k)	. Florida Statutes further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 carb, 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 of Brock 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR