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

PROPIT CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthaky

**FILED** 

Sep 18 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000082445 (4)

PRODU	CTS THAT PRODUCE, INC.								
Principal Plac	e of Business	Mailing Address			TERRITORI CIO ROLOS ORIGI ORISI BOSE	EBIN 1640  18148   FO	<b>  </b>	mete i <b>di</b> j	
1000-60UTH-E	AST-17TH-STREET	1000-SOUTH EAST 17TH	<del>STREET</del>						
SUITE 200	DALE C: 00040	SUITE 200 PORT LAUDERDALE EL 33	2040 0400						
רטתו באטטבת	DALE FL 00016	FORT - LAUGE RUBLE FL. 3	131 pr <del>2144</del>	3 D:	ate Incorporated or Qualific	ed <b>3a.</b> Date	of Last Re	eport	7
6 Palestant D		I Do Malling Address		10	)/27/1995	05/01/	1996		
2. Principal P	lace of Businoss  SW 8 Street	28. Mailing Address	ades Ruan	$J \mid A \mid $	I Number 6 <b>5-0664570</b>			plied For	-[
Suite, Apt.		26 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	46.2 KOOK		0070004070			t Applicable Additional	-
22	1, 00.	27 Juile 2	11	5. Ce	ertificate of Status Desired	B,	Fee Re		
Cipy & Stat	θ Δ		1 / 1	6. Ele	ection Campaign Financino	1	\$5.00	<del></del>	1
	idano beoch fl	28 BOCC RAT	ton fl		ust Fund Contribution	' 🗀	Added t		
- 793つ1	Country	Zip	Country	8. 1h	is corporation has liability			199.032,	1
24 55UK		29 33434	30 PAIM E		orida Statutes	Yes 🔃			
	9. Name and Address of Current	Registered Agent		10. No	ame and Address of New	Registered Age	ent		4
	TH, WILLIAM P. III		81 Name	Rohert	· Hausman	<i>(</i>			
100	3 SOUTH EAST 17TH STREET		82 Street	Address (P.Q.	Box Number is Not Accer	otable)			1
	E_200_			1,1 (2)	aces koad				4
FOR	T LAUDERDALE FL 33316		83	te al	1				
			84 CHV	0.	<u>'</u>	[	5 Zip (	Code .	1
				ca Ko	מסרג	FL ]	<u> </u> /33	<u> 4841</u>	
<ol> <li>Pursuant office or r</li> </ol>	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with and a cert the obligat	and 607.1508, Florida Statut WiFlorida, Such change was a	tes, the above-named authorized by the core	corporation sociation s	ubmits this statement for the	ne purpose of ch scept the appoint	anging its ImenLas	s registered registered	
agent. I a	m familiar with and a cert the obliga-	ions of Section 607.0505, Fi	orida Statutes.	5015110 E00	a di directore. I nereby de	-11	inon ao	, og volo-ba	-
SIGNATURE	X Fund (//	m pd	!S	******		80019	7		
10	Signature, type d or printed name of register transport OFFICERS AND	and tele if applicable NOT	( Registered Agent signature 13.		nstating) DITIONS/CHANGES TO OF	CATE !	DECTOR	C INI 10	1,,
12.	D OFFICERS AND	DELETE	1.1 TITLE	anact	- LOUS MAN		Change	Addition	- 0/0
NAME	HEATH, WILLIAM P III	El mercie	1.2 NAME	DOC!	LICASILILIA	'			5
STREET ADORESS	1003 SOUTH EAST 17TH ST., S	SLITE 200	1.3 STREET ADDRESS	1.1.1	Glades KO		₩ 2	711	3
CITY-ST-ZIP	FORT LAUDERDALE FL 33316			paca	Katon FL	3343	4		C T
TITLE	D	MELETE	1,4 CITY-ST-ZIP 2,1 TITLE				Change	Addition	18
NAME	CHESNUTT, ELLA	<b>—</b>	2.2 NAME				g-		
STREET ADDRESS	269 CUSICK ROAD, SUITE C-2		2.3 STREET ADDRESS						
	ALCOA TN 37701		2.3 STREET ADDRESS						Ì
CITY-ST-ZIP TITLE	D	LILETE	31 THILE			, , , , _	Change	Addition	1
NAME	DORROUGH, JAYME	• •	3 2 NAME			-	-		
STREET ADDRESS	269 CUSICK ROAD, SUITE C-2		3 3 STREET ADDRESS						
CITY-ST-ZIP	ALCOA TN 37701		3.4. CITY - ST - ZIP						
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption slated in Section 119.07(3)(); 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.