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

PROFIL CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P960000 105108

DOCUMENT # P916 1. Corporation Man 9 Olson Landing Inc.

May 13 1998 8:00am Secretary of State

	C			1
Principal Place of Bissings Making Admiss				
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				February 2, 1996
2. Principal Place of Burners 2a. Mailing Address				4. FEI Number Applied For
21 4727 N. Monroe Street 26 Suite Apt # etc Suite Apt # etc				59-3356676 Not Applicable
Suite Apt #, etc Suite Apt. #, etc 27				5. Certificate of Status Desired
City & State City & State				6. Election Campaign Financing \$5.00 May Be
Tallahassee, Fl 28				Trust Fund Contribution
Zip	Country	Zρ	Country	8. This corporation owes or has paid the current year intangible
24 3230	9. Name and Address of Curren	29 Peristered Agent	30	Personal Property Tax due June 30. XX Yes No 10. Name and Address of New Registered Agent
* * * * · · ·		(Negisteren Agent	81 Name	10. Halle and Acciess of Hely Ragistered Agent
	dad Ghazvini			
4727 N. Monroe Street Tallahassee, Fl 32303			82 Street A	Address (P.O. Box Number is Not Acceptable)
Tallanassee, FI 32303			83	
			84 City	85 Zip Code
				FL
office or re agent I a SIGNATURE	registered agent or both, in the State im familiar with, and accept the obligation of the conduction o	of Fforidal Such ch ange was tions of Section 607,0505, F	 authorized by the corp florida Statutes. OTE Registered Agent signalure	corporation submits this statement for the purpose of changing its registered to ration's board of directors. I hereby accept the appointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TATRE	Sec/Trea.	DELETE	1 1 TITLE	Change Addition
VAME	1			
STREET ALIDRESS	6000 Boynton Homestead Tallahassee, Florida 32308		1 3 STREET ADDRESS	
0.4V+\$1-2/P			1.4 CITY-ST-ZIP	
TITLE	Director	☐ DELETE	2 1 TITLE	☐ Change ☐ Addition
NAME	Behzad Ghazvini		2 2 NAME	
STREET ADDRESS	7516 Preservation F		2 3 STREET ADDRESS	
City-\$T-ZIP	Tallahassee, Floric	Ja 32308 ☐ DELETE	2. 4 CITY - ST - ZIP 3.1 FITLE	☐ Change ☐ Addition
'IAME	Director Mehran Ghazvini	C OCCC	3.2 NAME	Collarge C Addition
	2910 Royal Palm Way	,	3 3 STREET ADDRESS	
City-St 7IP	Tallahassee, Floric		34 C'TY-ST-ZIP	
TITLE	President	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	Hossein Ghazvini		4 2 NAME	
STREET ADDRESS	12.22 112011		4.3 STREET ADDRESS	
CITY - ST - 7IP	Tallahassee, Floric	ia 32308	4.4 CITY+ST+ZIP	
TITLE	•	☐ DELETE	5.1 THUE	☐ Change ☐ Addition
NAME			5 2 NAME	30
STREET AUDRESS			5 3 STREET ADDRESS	られる
377 51 7IP		DELETE	6 FTITLE	0000025246313hange Addition
TITLE		L Octete	6 2 NAME	-05/15/9801008003
NAME STREET ADDRESS			6.3 STREET ADORESS	***150.00
STREET ADDRESS			6 4 CITY - ST - ZIP	•
14. I hereby c	Dertry that the information supposed wi	th this filing does not qualify	for the exemption state	d in Section 119.07(3)(i). Florida Statutes. I further certify that the information
officer or a		ver or trustee empowered to		nature shall have the same legal offect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

H. GHAZVINI SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

514-1000