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

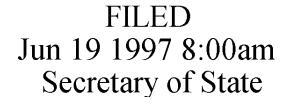
PROFITA CORPORATION ANNUAL REPORT 1997



Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000031275 (6)

WEDDING PROFESSIONAL ASSOCIATES, INC.





Principal Place of Business		Mailing Address	Mailing Address		T SOUTHDRE FIN FORST BITEL ADDIT ONLY DELITE OUTDE TIME LINES TOUR 100%; SITE 1004	
2837 21ST AVENUE, NORTH ST. PETERSBURG FL 33713		2837 21ST AVENUE. NORTH ST. PETERSBURG FL 33713-4203				
		• • • • • • • • • • • • • • • • • • • •			T	
				 Date Incorporated or Qualified 04/04/1996 	3a. Date of Last Report	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 26		26			Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$8.75 Additional Fee Required	
City & State		City & State	City & State		\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,	
24	25		0	1	Yes No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	jistered Agent	
_ MO0	IRE, MICHAEL G		81 Name	117 PAton		
850 i	FIFTH AVENUE, SOUTH 🔻 🦙		82 Street Ad	duess (P.O. Box Number Is Not Acceptab	ie)	
_ NAP	LES FL 33940	>0 10 TO _	28.	37 21S+ HVW	rue Morth	
	· · · · · · · · · · · · · · · · · · ·		83			
-			84 City	1	To-1 7: 0: 4:	
•			84 City	PITTIKINA	- FI 85 労労ツ/ス	
11. Pursuant	to the provisions of Sections 607 05	02 and 607,1508, Florida Statutes	, the above named co	rporation submits this statement for the p	urpose of changing its registered	
office or r	egistered agent, or both, in the Stat	e of Florida, Such change was aut	thorized by the corpor	ation's board of directors. Thereby accep	t the appointment as registered	
	Tit tarrinar with, and accept the bon,	gallorison, haviloy doy, 03032 form	ua Statules.		5-8-97	
SIGNATURE	Signature, lyped of printed name of registored in	gent and title it enpiricable. (NOTE: 6	Registered Agent signature rec	bited when robstating)	DATE	
12.	OFFICEHS AT	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE		easurer DELETE	1.1 TILE		Change Addition	
NAME	Callin	a NON , pt	1.2 NAME			
STREET ADDRESS	Carni Gai	J' (I PATA	. 1.3 STREET ADDRESS			
CITY-ST-ZIP	0834 71ST K	W.N. 351:	1.4 CITY - ST - ZIP			
TITLE	President.	DELETE	21 TITLE		Change Addition	
NAME	Piestado.		2 2 NAME			
STREET ADDRESS	LIZ PATELL		2.3 STREET ADDRESS			
CITY-SI: ZIP	2837 2/s+ A	re, KI.	2. 4 CITY - ST - ZIP		ì	
TITLE	st peterson	O J 35 D OFLETE	3.1 TITLE		Change Addition	
NAME		1 21:33 F13	3.2 NAME		_ • •	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - \$1 - ZIP			
TITLE		DELETE	4.1 YILE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS	•		
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TOLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		Callo	
CITY-ST-ZIP					<i>UW</i>	
TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition	
NAME		L_I DELEVE,				
1			6.2 NAME	30000221 -06/20/970102	(7014	
STREET ADDRESS			6.3 STREET ADDRESS		t UIT	
CITY-ST-ZIP		and the state of t	6.4 CHY-ST-ZIP	***165.00		

information indicated on this annual report or supply I am an officer or director of the corporation or the appears in Block 12 or Block 13 is changed, or on a mental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that cei) or prusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name