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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P96000042521 (0)

PROFESSIONAL PROCESSING AND MARKETING, INC.

Principal Place of Business 2824 N.E. 32ND STREET #6 FORT LAUDERDALE FL 33306

jt.

Mailing Address

2824 N.E. 32ND STREET #6 FORT LAUDERDALE FL 33306

## FILED Apr 07 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 05/20/1996

2. Principal Place of Business				2a. Mailing Address					4, FEI Number	L A	pplied For	
21			26	26					65-0688717	N	ot Applicable	
Suite, Apt.	#, elc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75	Additional	
22				27					5. Certificate of Status Desired	Fee R	Fee Required	
City & State				City & State					6. Election Campaign Financing	\$5.00	May Be	
23			28	28					Trust Fund Contribution		to Fees	
Zip	Country			Zip Cou			ntry		8. This corporation owes or has paid the current year Intangible			
24	25 29 30							1	Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent				
2824 N.E. 32ND STREET #6 FORT LAUDERDALE FL 33306							81 Name					
							82 Street Address (P.O. Box Number is Not Acceptable)					
							82 Street Address (P.O. Box Number is Not Acceptable)					
							83					
							84 City 85 Zip Code					
							City		FI	<b>85</b> Zip	Code	
44. Durament to the provisions of Coolings 607 0100 and 607 1500. Florida Otto documents							named eer	nore		■     aLebanaina	to registered	
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, or both, in the State of Florida. 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												
	Signature, typed		putried agent and title if			Ago:	nt signature requ	nted w				
12.	<del></del>	OFFIC	ERS AND DIRECT		13.				ADDITIONS/CHANGES TO OFFICERS AN		·	
TITLE	D	U DATDIOLA I		☐ DELETE	1,1 111		}			Change	Addition	
NAME	MELTON, PATRICIA J											
STREET ADDRESS							ADDRESS				ļ	
CITY-ST-ZIP	FORT LAUDERDALE FL 33306					1.4 CiTY-ST-ZIP						
TITLE				☐ DELETE	2.1 T/l	LE				Change	Addition	
NAME					2.2 NA	ME	1				Ì	
STREET ADDRESS					2.3 ST	REET :	ADDRESS				]	
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NAME				- Contract	4. 2 N/		İ			on 190		
							ADDRESS					
STREET ADDRESS							ADDRESS					
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NAME					5.2 NA							
STREET ADDRESS							ADDRESS				}	
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TITLE				☐ DELETE	6.1 TiT					Change	Addition	
NAME					6.2 NA	ME	1					
STREET ADDRESS					6.3 51	REETA	address					
CITY-ST-ZIP			- <del></del>		6.4 011					- <del></del>		
14. I hereby o	ertify that th	e information su	oplied with this filir	ig does not qualify for	or the exe	mpt	ion stated in	Sec	ction 119.07(3)(i), Florida Statutes. I further o	ertify that the	information	
officer or a	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.											
Block 12 d	or Block 361	r changed, or or	an attachment wi	th an address.					•	Gew		