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

PROFIL CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997

DOCUMENT # P96000057245 (8)

WARDLOW & ALLEN, C.P.A., P.A.

**FILED** Mar 24 1997 8:00am Secretary of State



Principal Place of Burniess Mailing Address						4 LOGITE AT THE PRICE SIZES DOINT SELECT COURT OF THE LEGISLA COURT DISSURPTION OF THE LOGISLA			
3142 NORTHSIDE DRIVE SUITE 201 KEY WEST FL 33040		3142 NORTHSIDE DRIVE SUITE 201 KEY WEST FL 33040-8012							
nei neoi re		(ID) TIED! IC WATE OU	•			3. Date Incorporated or Qualified 07/03/1996	3a. Date	of Last I	Teport
<b>2.</b> Pancipa Pi <b>21</b>	iane (* Paumers	2a. Mailing Address 26				4. FEI Number 6800 85	5	}	pplied For ot Applicable
Sacter Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional tequired
Orty & State 23		City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip 24	Country <b>25</b>	Zu)				This corporation has liability for intangible tax under s. 199.032,     Florida Statutes     Yes No			
	9. Name and Address of Curre	nt Registered Agent		L.		10. Name and Address of New Re	istered Aç	jent	
ALLE	EN, JEFFREY E			81	Name				
3142 NORTHSIDE DRIVE SUITE 201				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
	WEST FL 33040			83					
				84	City			<b>85</b> Zip	Code
	and the second s	20 1202 4700 8		<u> </u>		rporation submits this statement for the p	FL		7
SIGNATURE	m familiar with, and accept the oblig Street of the formations of each stage	ent and the jrapplicable (N	OTi. Hogistere			ured when reinstating)	DATE	UDEOTO	
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SDREET ADDRESS	Wardlow, Kenneth D 3142 Northside Drive				ADDRESS				
(a'A \$1 7.5	KEY WEST FL 33040				IT-ZIP				
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NAME:	ALLEN, JEFFREY E		2.2 N	AME	l				
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records sensing continue means consumptine with unstituing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indecided on link annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that Lam 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 on an agreement with an address.

**SIGNATURE:** 

Dayane Et one #