

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000072948 (8)

1. Corporation Name

PROSTYLE CORPORATION

Principal Place of Business

11380 NW 16TH STREET
PEMBROKE PINES FL 33026

Mailing Address

11380 NW 16TH STREET
PEMBROKE PINES FL 33026

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/28/1996

3a. Date of Last Report

N/A

4. FEI Number

65-0692562

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 P.O. BOX 822898

Suite, Apt. #, etc.

27 City & State

28 SOUTH FLORIDA, FL

Zip

29 33082-2878

Country

30 BROWARD

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WALSH, E. ANTHONY
11380 NW 16TH STREET
PEMBROKE PINES FL 33026

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

100002263861-2

-08/11/97-01165-011

***165.00 ***165.00

FL 165.00

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 or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/S/T ☐ Change ☒ Addition
1.2 NAME E. ANTHONY WALSH
1.3 STREET ADDRESS 11380 NW 16 ST.
1.4 CITY-ST-ZIP PEMBROKE PINES, FL 33026

2.1 TITLE V ☐ Change ☒ Addition
2.2 NAME JOAN M. WALSH
2.3 STREET ADDRESS 11380 NW 16 ST.
2.4 CITY-ST-ZIP PEMBROKE PINES, FL 33026

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

APPROVED
AND
FILED

1997 AUG -5 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (4/97)

②

ProStyle

Corporation

Tele/Fax: (954) 450-4836
Pager: (305) 706-5779

P.O. Box 822898
South Florida, FL 33082-2898

July 28, 1997

**Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314**

Re: ProStyle Corporation - 1997 Annual Report

On July 17, 1997 ProStyle Corporation received a 1997 Annual Report Packet. The packet was stamped **2ND Notice * File Now. Filing Fee is \$550.00***. After reading through the packet I realized a 1st notice should have been mailed to me which I did not receive! The 2nd notice included \$385.00 late fee. On July 18, 1997 I called (904) 488-9000 and spoke to one of your operators. I explained I had not received the **1st Annual Report Packet**. The operator instructed me to write this letter stating I never received the first notice and to mail the letter along with a check for \$165.00.

Enclosed with this letter is a check for \$165.00 and the completed 1997 Annual Report. Should you have any further questions please call me at (954) 450-4836.

Sincerely



E. Anthony Walsh
ProStyle Corporation
President / Registered Agent