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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 29, 1999 8:00am Secretary of State

| L | 1999 | OF WE THE | DIVISION OF C | ORPORATIONS | 01-29-1999 90002 046 *** | *150.00 | |
|---|--|---|--|---|--|----------------------------------|-------------------------|
| | MENT # P9 | 6000088 | 217 | | | | |
| 1. Corporatio | -I-PRO, INC | 1 | | • | | | |
| WONTH | Trno, ING. | <u> </u> | | | THE RESERVE OF THE PRINT BOTH AND IN | IALIN AANIA KANAN KANAN KANA | Dagenski erre (40) |
| | | • | | | | | |
| Principal Place of Business Mailing Address | | | | · · · · · · · · · · · · · · · · · · · | | 811) 8811 88181 1816 1816 1816 1 | LOÀRE LIGHT FOOT LEGY |
| 13500 WORTHINGTON WAY 13500 WORTHINGTON WAY | | | | | | | |
| BONITA SPRINGS FL 34135 BONITA SPRINGS FL 341 | | | | | DO NOT WRITE IN THIS SPACE | | |
| . 1741. 12 | en e | | | | 3. Date Incorporated or Qualifect | | |
| | die Courtifie | • | | | 10/24/1996 | • | |
| 2. Principal F | Place of Business | 2a. N | Mailing Address | | 4. FEI Number | | Applied For |
| 21 | , | 26 | | <u> </u> | 65-0706858 | | Not Applicable |
| Suite, Apt. | . #, etc. | | uite, Apt. #, etc. | | 5. Certifcate of Status Desired | | 5 Additional |
| City & Sta | to . | 27 | City & State | | 6 Floring Compain Financia | | Required |
| 23 | | 28 | niy a olale | | Election Campaign Financing Trust Fund Contribution | | 00 May Be ed to Fees |
| Zip | Country | | ip | Country | 8. This corporation owes the cur | | , |
| 24 | 25 | 29 | ; | 30 | Personal Property Tax. | Yes | □No |
| | 9. Name and Addres | s of Current Register | red Agent | 81 Name | 10. Name and Address of New | Registered Agent | |
| PINT | TER, MICHAEL R | J. J | 4.1 | 81 Name | · | | |
| ₩0-432 | 8 CORPORATE SQUAR | E . | | 82 Street Addre | ess (P.O. Box Number is Not Accep | lable) | |
| | TE C | | | 83 | 1967 | | |
| 31 NAP | PLES FL 34104 | <u>,</u> | (લાસાસભાકા (તારે છે. | | | | |
| 新疆等,种心··· | A. J. 1883 | | atti ideli. 1 iliadilita | 84 City | | FL 85 2 | ip Code |
| 11. Pursuant | to the provisions of Section | ons 607.0502 and 607 | 1508, Florida Statute | s, the above-named corpo | oration submits this statement for the | purpose of changing | its registered- |
| agent. I a | registered agent, or both, i am familiar with, and accep | n the State of Florida. of the obligations of, S | ection 607.0505, Flori | inonzed by the corporatio da Statutes. | on's board of directors, I hereby acce | ept the appointment as | s registered |
| SIGNATURE | | NAGW | | · | | 1-9-44 | |
| 12. | <i></i> | f registered agent and title if ap FICERS AND DIRECT | | Registered Agent signature required 13. | ADDITIONS/CHANGES TO O | DATE FICERS AND DIREC | TORS IN 12 |
| TITLE | ĪĎ | | ☐ DELETE | 1.1 TITLE | 60 07.00PED | | ge Addition |
| NAME | WHITMORE, JAMES | | | 1.2 NAME | State Manager Area | • | , |
| STREET ADDRESS | | | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | BONITA SPRINGS FL | . 34134 | | 1.4 CITY-ST-ZIP | | | |
| TITLE ' | i i | | ☐ DELETE | 2.1 TITLE | | ☐ Chan | ge |
| NAME | | l | | 2.2 NAME | • | | |
| STREET ADDRESS CITY-ST-ZIP | | د در سد سینک سیایی | ده خوا در سای ده در انتخاص خوا داده | 2.3 STREET ADDRESS | والأستين المراجع والمتعاد المتعاد | للمالية ويرطونه | بالمناج والمناد |
| TITLE | <u> </u> | 5 1 1 5 1 No. 1 | ☐ DELETE | 2. 4 CITY-ST-ZIP | | Chan | ne |
| NAME | LEGALITATION IN | . √ | | 3.2 NAME | | | |
| STREET ADDRESS | protestantes adulta La c | : -1 | | 3.3 STREET ADDRESS | Freeze, Control of the Control of th | e spot die hij gedaat be en hoed | registavet, idaternat |
| CITY-ST-ZIP | is to | | | 3.4. CITY-ST-ZIP | | 出居得勤练。建 | 推图图第 |
| TITLE | transfer a contract of the | | ☐ DELETE | 4,1 TITLE: | AND FIRST SEC. | Chan | ge 🔛 🔲 Additión |
| NAME THAT VALUE | NET TO DAY | 1 | ry respectively | 4, 2 NAME | | | |
| STREET ADDRESS | 143 St. 94835 | | o 1980 - 1984 | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP TITLE | | | ☐ DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | | ☐ Chan | ge |
| NAME | | • | | 5.2 NAME | · [20] [34] | | |
| STREET ADDRESS | | | | 5.3 STREET ADDRESS | y = 1 | | |
| CITY-ST-ZIP | lì | | | 5.4 CITY-ST-ZIP | | | <u> </u> |
| TITLE | With White and a | | ☐ DELETE | 6.1 TITLE | | Chan | ge Addition |
| NAME | 1 (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4 | 2 P 10 . 1 | | f | | | |
| | ASSE BONETA PENTA | | | 6.2 NAME | | | |
| STREET ADDRESS | ACID BONG A SECOND AS SECO | RICK Distriction | | 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | | | |

14. I 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, with all other like empowered.

SIGNATURE

MUSIGNULAUS REQUIRED SANTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-99

(94))495-)750 Daytime Phone #