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

PROFI1 CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000013160 (1)

PROFIT TECHNOLOGIES CORPORATION

Principal Place of Business	Principal	Place		
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Mailing Address

FILED Jun 17 1998 8:00am Secretary of State



1231 SCANDIA TERRACE OVIEDO FL 32765	P.O. BOX 4787 Winter Park FL 32783	-4 787		DO NOT WRITE IN TH	IS SPACE
<u> </u>				3. Date Incorporated or Qualified 02/10/1997	
2. Principal Place of Business	2a. Mailing Address			4, FEI Number	Applied For
21	26			56-1 <u>50</u> 2664	Not Applicable
Suite, Apt. #, etc.	Suito, Apt. #, etc. 27			Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 25	Zip 29	Countr 30	y 	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
9. Name and Address of	Current Registered Agent			10. Name and Address of New Register	ed Agent
" CICER E LLE, JOHN JR.		81	Name		
1231 SCANDIA TERRACE OVIEDO FL 32765		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
4		83			
		84	City	F	85 Zip Code
office or registered agent or both, in the agent. I am familiar with, and accept the SIGNATURE	e State of Florida. Such change was e obligations of, Section 607.0505, F	authorized b lorida Statute	y the corpora is.	rporation submits this statement for the purposi ation's board of directors. I hereby accept the a	appointment as registered
Signature types or practed name of reg-			ent signature requ	ured when reinstating) DATI	
	RS AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
Pres. & Director	·	1.2 NAME			
NAME John Cicerelle,	ህዮ. N / A		T ADDRESS		
STREET ADDRESS P.O. Box 4787		1.4 CITY-	1		
CHY-SI-ZIP Winter Park FL		2 1 THUE	51-2IF		Change Addition
pec. / Treas. /L	inectory ve	22 NAME			
beorge c rickee.			T ADDRESS		
STREET ADDRESS P.O. Box 159 CITY-ST-ZIP COrnelius NC 28	N/A	2. 4 CITY-			
WP & Director	DELITE	3 1 1 I I L F			Change Addition
Christopher B. M	lekaa	3.2 NAME			
STREET ADDRESS P.O. Box 159	N/A	3 3 STREE	T ADDRESS		
CHY-ST-ZIP Cornelius NC 2	0034	3.4. CITY-	ST-71P		
TITLE POTTIETTUS NC Z	DELETE	4 1 TITLE			L. Charige L. Addition
NAME		4. 2 NAME			1 /1/1-
STREET ADDRESS			T ADDRESS		-M///1
CITY-ST-ZIP	Document	4.4 CITY-	S1 - 7(P		Change Addition
TITLE	DELETE	5 1 THILE		•	TO CHRURE TO MUNICION
NAME		5.2 NAME	LADDDCCC		
STREET ADDRESS			T ADDRESS		
CITY-ST-ZIP TITLE	DELETE	54 CHY-	S1 - ZIP		Change Addition
NAME		6.2 NAME		3000025 647	
STREET ADDRESS		1	1 ADDRESS	- 06 /19/9801009	003
CITY_ST_ 7P		6.4 CHY-		***150 . 00	

14. Thereby 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 of 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 only a alfachment with an address. BEDRUE C MOKEE TR