


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P97000023256</b> 1. Entity Name <b>PROFIT TECHNOLOGIES ENTERPRISES, INC.</b>	
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Principal Place of Business <b>209 DELBURG ST., SUITE 206 DAVIDSON, NC 28036</b>	Mailing Address <b>PO BOX 159 CORNELIUS, NC 28031</b>
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**DO NOT WRITE IN THIS SPACE**



04272005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>56-1903562</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCKEE, GEORGE C JR PO BOX 4479 DAVIDSON, NC 28036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MCKEE, CHRISTOPHER B PO BOX 4479 DAVIDSON, NC 28036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MCKEE, GEORGE C SR PO BOX 159 CORNELIUS, NC 28031
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCKEE, JEAN P PO BOX 159 CORNELIUS, NC 28031
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

U00000350528  
05/02/05-80109-003 150.00

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: George C McKee Jr **GEORGE C MCKEE JR** 4/27/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #