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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000072941 (2)

PROFESSIONAL PERMIT SERVICES, INC.

Mailing Address Principal Place of Business

FILED Feb 20 1998 8:00am Secretary of State



| 13860-12 WELLINGTON TRACE, STE 332 WELLINGTON FL 33414 | | 13860-12 WELLINGTON TRACE. STE 332 WELLINGTON FL 33414 | | DO NOT WRITE IN THIS SPACE | | |
|---|--|---|------------------------|---|--|---------------------|
| | | | | | 3. Date Incorporated or Qualified 08/21/1997 | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4, FEI Number | Applied For |
| 21 | | 26 | | | 65-0776850 | Not Applicable |
| Suite, Apt. | #, 91c. | Suite, Apt. #, etc. | d | | | \$8.75 Additional |
| 22 | | 27 | | | 5. Certificate of Status Desired | Fee Required |
| City & State | 9 | City & State | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees | |
| Zip | Country | Zip | Counti | У | 8. This corporation owes or has paid the | |
| 24 | 25 | 29 | 30 | | Personal Property Tax due June 30. | Yes No |
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent 81 Name | | |
| CONDATORE, JACK JR. | | | | Name | | |
| 13860-12 WELLINGTON TRACE, STE 332 | | | | Street Add | lress (P.O. Box Number is Not Acceptable) | |
| WELLINGTON FL 33414 | | | | | , | |
| | | | 8 | 3 | | |
| | | | 8 | City | F | 85 Zip Code |
| 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 | | | gent signature requ | olred when reinstating) DATE | |
| 12. | | AND DIRECTORS | 13. | · · · · · · | ADDITIONS/CHANGES TO OFFICERS A | |
| TITLE | D. | DELETE | 1.1 TOLE | | | ☐ Change ☐ Addition |
| NAME | CONDATORE, JACK JR. | LOP ATE AND | 1.2 NAME | | | |
| STREET ADDRESS | 13860-12 WELLINGTON TR | IACE, STE 332 | 1.3 STREE | ET ADDRESS | | |
| CITY - ST - ZIP | WELLINGTON FL 33414 | | 1.4 C(TY- | ST-ZIP | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | | | 2.2 NAME | | | |
| STREET ADDRESS | | | 2.3 STREE | ET ADDRESS | | , |
| CITY-ST-ZIP | | | 2. 4 CITY | -ST-ZIP | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREE | T ADDRESS | | |
| CITY-ST-ZIP | | | 3.4. CITY | - ST - ZIP | | |
| TITLE | | DELETE | 4.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAM | E | | |
| STREET ADDRESS | | | | T ADDRESS | | |
| | | | 4.4 CITY- | | | |
| CITY-ST-ZIP TITLE | | DELETE | 5.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | | |
| | | | | | |] |
| STREET ADDRESS | | | | ET ADDRESS | | |
| CITY-ST-ZIP | | DELETE | 5.4 C/TY- 6.1 T/TLE | | | Change Addition |
| TITLE | | רו הגובונ | | | | T OHBING C MANIEUR |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STRE | et address | | |
| CITY_CT_7ID | | | 64 CITY- | ST-7IP | | l |

14. 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 of the receiver of 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 changon arrange and the corporation of the corporation of the corporation of the receiver of 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 changon arrange and the corporation of the corporation o