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FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000078745 (1)
1. Corporation Name

FLORIDA PROFESSIONALS ONLINE, INC.



Principal Place of Business

1366 N.W. 112TH TERRACE
SUITE 200
CORAL SPRINGS FL 33071

Mailing Address

1366 N.W. 112TH TERRACE
SUITE 200
CORAL SPRINGS FL 33071

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 71620 MORTLEHEAD CT
Suite, Apt. #, etc.

2a. Mailing Address

26 71620 MORTLEHEAD CT
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

09/11/1997

4. FEI Number

65-0785966

Applied For

Not Applicable

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

23 City & State

23 Parkland FL

28 City & State

28 Parkland FL

24 Zip

24 33067

25 Country

25 USA

29 Zip

29 33067

30 Country

30 USA

9. Name and Address of Current Registered Agent

DONOFRIO, DENISE
3300 UNIVERSITY DRIVE
SUITE 306
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

81 Philip Cucci

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

83

83

84 City

FL

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 agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DONOFRIO, RON
STREET ADDRESS 1366 N.W. 112TH TERRACE
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ DELETE

NAME CUCCI, PHIL
STREET ADDRESS 3300 UNIVERSITY DR. SUITE 001
CITY-ST-ZIP CORAL SPRINGS FL 33015

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

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 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.

SIGNATURE:

4/20/98

CR2E034 (10/97)