

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 30, 1999 8:00 am  
Secretary of State

04-30-1999 90186 007 \*\*\*150.00

DOCUMENT # P97000107632

1. Corporation Name

NEW-ERA PROFITS, INC. CORPORATION

Principal Place of Business

441 SE 10TH STREET  
APT. 201-D  
DANIA FL 33004

Mailing Address

441 SE 10TH STREET  
APT. 201-D  
DANIA FL 33004

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/22/1997

4. FEI Number

65-0801004

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 the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 604 SE 10TH AVE

Suite, Apt. #, etc.

22

23 City & State DEERFIELD BEACH FL

24 Zip 33441

25 Country USA

2a. Mailing Address

26 604 SE 10TH DUE

Suite, Apt. #, etc.

27

28 City & State DEERFIELD BEACH FL

29 Zip 33441

30 Country USA

9. Name and Address of Current Registered Agent

SHIVELY, RICHARD  
441 SE 10TH STREET  
APT. 201-D  
DANIA FL 33004

SHIVELY, RICHARD  
604 SE 10TH DUE  
DEERFIELD BEACH  
FL 33441

10. Name and Address of New Registered Agent

81 Name

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

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 Rick Shively

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-26-99

DATE

12. OFFICERS AND DIRECTORS

TITLE 0 ☐ DELETE

NAME SHIVELY, RICHARD  
STREET ADDRESS 441 SE 10TH 201-D  
CITY-ST-ZIP DANIA FL 33004

TITLE 0 ☐ DELETE

NAME SHIVELY, HEIDI  
STREET ADDRESS 441 SE 10 ST 201-D  
CITY-ST-ZIP DANIA FL 33004

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 0 ☒ Change ☐ Addition

1.2 NAME SHIVELY, RICK  
1.3 STREET ADDRESS 604 SE 10TH DUE  
1.4 CITY-ST-ZIP DEERFIELD BEACH FL 33441

2.1 TITLE 0 ☒ Change ☐ Addition

2.2 NAME SHIVELY, HEIDI  
2.3 STREET ADDRESS 604 SE 10TH DUE  
2.4 CITY-ST-ZIP DEERFIELD BEACH FL 33441

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, with all other like empowered.

SIGNATURE: Rick Shively  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99 954-426-9062  
Date Daytime Phone #

CR2E034 (11/98)