

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 22, 1999 8:00 am
Secretary of State

04-22-1999 90106 006 ***150.00

DOCUMENT # P98000009043

1. Corporation Name
PROTON G.P. INC.

Principal Place of Business
7740 S.W. 104 STREET STE. 200
MIAMI FL 33156

Mailing Address
7740 S.W. 104 STREET STE. 200
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1998

4. FEI Number

65-0809562

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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 9095 S.W. 87th Ave.

Suite, Apt. #, etc.

22 Suite 777

23 City & State
Miami, FL 33176

Zip Country

24 33176

25 MiamiDade

2a. Mailing Address

26 9095 S.W. 87th Ave

Suite, Apt. #, etc.

27 Suite 777

28 City & State
Miami, FL 33176

Zip Country

29 33176

30 MiamiDade

9. Name and Address of Current Registered Agent

DORSY, JAMES A
7740 S.W. 104 STREET STE. 200
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name Syrie Ortiz

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

9095 S.W. 87th Avenue

83 Suite 777

84 City Miami

FL

85 Zip Code 33176

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]

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

(NOTE: Registered Agent signature required when reinstating)

3/19/99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME DORSY, JAMES A

STREET ADDRESS 7740 S.W. 104 STREET STE. 200

CITY-ST-ZIP MIAMI FL 33156

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

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 Syrie Ortiz

1.3 STREET ADDRESS 9095 S.W. 87th Ave., Suite 777

1.4 CITY-ST-ZIP Miami, FL 33176

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, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/19/99

CR2E034 (11/98)