PRÓFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State 🔍 🚬 DIVISION OF CORPORATIONS

## FILED Apr 14, 1999 8:00 am Secretary of State 04-14-1999 90190 032 \*\*\*150.00

Principal Place 110 ROYAL PAL #217 HIALEAH GARDI 2. Principal Pl 21 Suite, Apt.	of Business M ROAD ENS FL 33016 lace of Business #, etc.	Mailing Add 110 ROYAL #217 HRALEAH G	···-	16		3. Date In 10/07	corporated or Qualif	IRITE IN TH	9 A N - \$8.75	pplied For ot Applicable Additional equired
City & State		27 City & 5	State			s Election	Campaign Financir	79 -		May Be
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24	25	29		30			al Property Tax.	u Daglates	✓ Yes	
	g. Name and Address of Curre	nt Registered A	gen <u>t</u>		81 Name	10, Name	and Address of New	m Kegistere	an wheur	
DEC	ALADO, EMILIO			ľ						
	ALADO, EMILIO ROYAL PALM ROAD				82 Street A	Address (P.O. Box	ress (P.O. Box Number is Not Acceptable)			
#217				ŀ	83 .					
HIAL	EAH GARDENS FL 33016			ŀ	84 City			<del></del>	. 85 Zip	Code
				l'	O City			F		
11. Pursuant office or n agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the obligi						s this statement for t irectors. I hereby ac	the purpose cept the app	of changing its pointment as n	s registered egistered
	Signature, typed or printed name of registared age OFFICERS AI		. (NOTE	13.	Agent signature re-	Quired when rainstating)	s this statement for tirectors. I hereby ac	the purpose cept the app		
SIGNATURE  12. IIILE NAME	Signature, typed or printed name of registaned ap OFFICERS AI D REGALADO, EMILIO	ent and title if applicable	. (NOTE	13. 1.1 TITL 1.2 NA	gent signature re	Quired when rainstating)		the purpose cept the app	AND DIRECTO	ORS IN 12
SIGNATURE  12. THLE NAME STREET ADDRESS	Signature, typed or printed name of registared app OFFICERS AI D REGALADO, EMILIO 110 ROYAL PALM ROAD	ent and 65e if applicable ND DIRECTORS	. (NOTE	13. 1.1 TITL 1.2 NA) 1.3 STF	Agent signature rel E ME REET ADDRESS	Quired when rainstating)		the purpose cept the app	AND DIRECTO	DRS IN 12
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indicated on this annual report or supplemental annual report is type 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 express, with all other like empowered.

SIGNATURE: