03171999-90162-040-\$150.00-\$150.00

PROFIL CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000101180

Mar 17, 1999 8:00 am Secretary of State 03-17-1999 90162 040 ***150.00

| D AND E | | NV INC | | | | |
|---|---|-------------------------------------|---|---|--------------------------------------|-------------|
| H AND L | CONSTRUCTION COMPA | N1, INO. | | | BB386 (288) 1884) is | |
| <u> </u> | | | | | | |
| | ce of Business | Mailing Address | | | | |
| 10735 N.W. 7TH AVENUE 10735 N.W. 7TH AVENUE MIAMI FL 33168 MIAMI FL 33168 | | | | DO NOT WRITE IN TH | S SPACE | |
| l | | | | 3. Date Incorporated or Qualified | | |
| 1. T | | | | 12/04/1998 | | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | 4. FEI Number | Apr | nied For |
| 21245 | | 26 68005 W. | 4054. | 65-0880024 | Not | Applicable |
| Suite, Apt #, etc. Suite, Apt #, etc. 27 | | 5 | 5. Certificate of Status Desired | \$8.75 A Fee Re | | |
| City & State City & State | | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 23 = VV) V | ANNI-FT | - 1 = AN DA F-/- | معادة حصو | Trust Fund Contribution | | Facs |
| 21 331V | 12 25 V.S.A. | 29 3 3\55 B | Country S. A. | This corporation owes the current year life Personal Property Tax. | | No |
| | 9. Name and Address of Curre | | | 10. Name and Address of New Registers | d Agent | |
| | | | 81 Name | | | |
| | ARITY, KEITH C | | B2 Street Address (P.O. Box Number is Not Acceptable) | | | |
| 10735 N.W. 7TH AVENUE | | | | - SAME | | |
| MIAN | AI FL 33168 / | | 83 | 311.00 | | ì |
| | | | 84 City | | 85 Zip C | ode |
| | | | ! [' | F | | |
| 11. Pursuant | to the provisions of Sections 607 050 |)2 and 607 1508, Florida Statutes | the above-named corporate | poration submits this statement for the purpose of | of changing its r cintment as rec | egistered (|
| agent. I a | am familiar with, and accept the obliga | ations of, Section 607 0505, Florid | a Statutes | poration submits this statement for the purpose toon's board of directors. I hereby accept the app | | |
| SIGNATURE | | | | | | |
| | Signature, typed or printed turns of reclaimmer age | | eqistered Ageni signature requir | ADDITIONS/CHANGES TO OFFICERS A | ND OIDECTO | 26 IN 12 |
| 12. | | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS A | ☐ Change | Addition |
| TITLE | PEAN POPPICK A | IT) Dereit | 11 TITLE 12 NAME | | | |
| KAME | DEAN, RODRICK A | | 13 STREET ADDRESS | | | 1 |
| STREET AODRESS | 1 | | n | | | |
| TITLE | MIAMI FL 33168 | DELETE | 1 + CITY-ST-ZIP 21 TITLE | | ☐ Change | ☐ Addition |
| | is Newell, Darin | | 2 2 NAME | | | |
| NAME | A COMPANY TO A STATE OF THE PARKET | ı | 23 STREET ADDRESS | | | j |
| STREET ADDRESS | MIAMI FL 33168 | | 2 # CITY-ST-ZIP | | | 1 |
| TITLE | MIAMI FE 33 100 | O DELETE | 317ITLE | | Change | Addition |
| NAME | | 2000 | 32 NAME | | | |
| STREET ADDRESS | | | 33 STREET ADDRESS | | |] |
| | \ | <u></u> | J4 City-St-ZiP | | | |
| CITY-ST-ZIP | | | | | Change | Addition |
| NAME . | | ☐ DELETE | 41 TITLE | | | ſ |
| | | DELETE | 4 1 TITLE 4 2 NAME | | | 1 |
| STREET ADDRESS | | □ DELETE | i I | | | |
| STREET ADDRESS | | ☐ DELETE | 4 2 NAME 4 3 STREET ADORESS | | | |
| STREET ADDRESS CITY-ST-ZIP TITLE | | DELETE | 4 2 NAME | | ☐ Change | ☐ Addition |
| CITY-ST-ZIP | | | 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP | | ☐ Change | Addition |
| CITY-ST-ZM TITLE NAME | | | 4 2 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5+TITLE | | ☐ Change | Addition |
| CITY-ST-ZIP TITLE | | | 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP 5 I TITLE 52 NAME | | ☐ Change | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | 4 2 NAME 4 3 STREET ADORESS 4 4 CITY-ST-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS | | ☐ Change | Addition |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ DELETE | 4 2 NAME 4 3 STREET ADDRESS 44 CITY-ST-ZP 5 1 TITLE 52 NAME 5 3 STREET ADDRESS 54 CITY-ST-ZP | | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | | ☐ DELETE | 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZP 5 I TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 I TITLE | | | |
| CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZEP | | DELETE | 4 2 NAME 4 3 STREET ADDRESS 44 CITY-ST-ZIP 51 TITE 52 NAME 5 3 STREET ADDRESS 54 CITY-ST-ZIP 61 TITE 62 NAME 53 STREET ADDRESS 64 CITY-ST-ZIP | Section 119.07(3)(i), Flonda Statutes. I further co | ☐ Change | ☐ Addrhon |

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: