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

PROFI CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 29 1997 8:00am Secretary of State

Principal Place of Bus ness 3303 SW 88 PL MIAMI FL 33165 (1) Mailing Address 3303 SW 88 PL MIAMI FL 33165			:			
			•	3. Date incorporated or Qualified 01/16/1991	3a. Date of L 05/01/19	
2. Frincipal F	face of Business	2a. Mailing Address		4. FEI Number		Applied For
21		26	·	65-0238797		Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 7 "	75 Additional se Required
City & Stat	te:	City & State		6. Election Campaign Financing		.00 May Be
23		28		Trust Fund Contribution		ided to Fees
₁ Zip	Country	Zip	Country	8. This corporation has liability for		der s. 199.032,
24	25 25 O Name and Address of	29 Current Registered Agent	30	Florida Statutes 10. Name and Address of New R	Yes No	
NUR	NEZ, BISMARK	· volitori itagini vigari	81 Name	10, 11, 11, 11, 11, 11, 11, 11, 11, 11,		
	3 SW 88 PL		82 Street Add	dress (P.O. Box Number is Not Accepta	able)	
MIA	MI FL 33165			Side (1,0. box (10.11bot) to (10) to bobble		
			83			
			84 City		FL 85	Zip Code
on cu or i	registered agent, or both, in th	he State of Florida, Such change was	authorized by the corpora	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of chang opt the appointme	ing its registered nt as registered
SIGNATURE	Signature Typed or porteo name of reg	oslered agent and the Cappricable. (NO	DTE: Registered Agent signature requ		DATE	
	Signature Typed or parties name of ma OFFICE				DATE	CTORS IN 12
SIGNATURE	Signate typed of protectians of trop OFFICE D NUNEZ, BISMARK	estered agent and Mile Tappricable. (NG ERS AND DIRECTORS	DTE: Registered Agent signature requ	uired when reinstating)	DATE ICERS AND DIREC	CTORS IN 12
SIGNATURE 12. THE NAVE SIBEEL ADDRESS	Signative typod or perfect arresoling OFFICE D NUNEZ, BISMARK 3303 SW 88 PL	estered agent and Mile Tappricable. (NG ERS AND DIRECTORS	TE: Registered Agent signature requirements 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS	uired when reinstating)	DATE ICERS AND DIREC	CTORS IN 12
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and 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:

Daytime Phone #