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

PROFII CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Corporation	MENT # ( ENTERPRISES,	S40147 INC.	7 (8)								
Principal Place of Business			Mailing Address				4 (00) 10 14 C C C C C C C C C C C C C C C C C C			IVIF 1 <b>VV</b>	
1800 S.W. 57TH AVE.			1900 S.W. 57TH AVE.								
A MIAMI FL 33155			MIAMI FL 33155				DO NOT WRITE IN THIS SPACE				
US							3. Date Incorporated or Qualified				
					_		03/22/1991				
<b>└</b>	Place of Business		2a. Mailing Address				4. FEI Number	Applied For			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				65-0254947	\$P 7	<del></del>	Applicable	
22			27				5. Certificate of Status Desired See Regulred Fee Regulred				
City & Stat	lo	City & State				6. Election Campaign Financing \$5.00 May Be					
23			28				Trust Fund Contribution Added to Fees				
Zip	Cou	ritry	Zip	Count	ry		8. This corporation owes or has paid the curre	nt yea Yes	r Intan		
24	g, Name and Ad	dress of Current	29    Registered Agent	30			Personal Property Tax due June 30.   10. Name and Address of New Registered A				
GA	RCIA, JOSE			8	1	Name					
1900 S.W. 57TH AVE.					2	Street Addr	ress (P.O. Box Number is Not Acceptable)				
Mu	AMI FL 33155										
				8	3						
				8	4	City	FL	85	Zip Co	de	
11. Pursuant office or i agent. I a	to the provisions of S registered agent, or t am familiar with, and a	ections 607.0502 odh, in the State o accept the obliga	and 607.1508, Florida Statu of Horida. Such change was tions of, Section 607.0505, Fl	tes, the abo authorized to orida Statuti	L ve- oy t os	named corp the corporat	poration submits this statement for the purpose of cition's board of directors. I hereby accept the appoint	L L hangir nlmen	ng its r t as re	egistered gistered	
SIGNATURE	Signature, typed or pristed it	Some of more hard account	t and other if south of the (MAC)	If: Ran stated A		e signature mauit	red when reinstating) DATE				
12.	Signature, types to pristous	OFFICERS AND		13.	ye i	. signature require	ADDITIONS/CHANGES TO OFFICERS AND I	DIREC	TORS	IN 12	
TITLE	DVPS		DELETE	11 TITLE				Char	ige	Addition	
NAME	GARCIA, JOSE			1.2 NAMI	E						
STREET ADDRESS	1900 S.W. 57TI	•		1.3 STRE							
CITY-ST-ZIP TITLE	MIAMI FL 3315	) 	DELETE	1.4 CITY - 2.1 TITLE		- ZIP	<del>-</del>	Chan	ne	Addition	
NAME	SABINA, ELISA		Doction	2.1 HILE 2.2 NAME		}	•	eri Avitesi	.Ro [	Audition	
STREET ADDRESS	-9021 SW 11TH	STREET		2.3 STRE		ODRESS	1465 SW 101 Terr. MIAMIL FL 33176				
CITY-ST-ZIP	MIAMI FL 3317	<del> </del>		2, 4 CITY	- <u>\$1</u>	· ZIP	MIAMI, FL 33176				
TITLE	D	A	DELETE	3.1 Talle		T	. ,	Chan	ge	Addition	
NAME	ROSARIO, GAR			3.2 NAME							
STREET ADDRESS	1900 S.W. 57Th MIAMI FL 3315			3.3 STREI		- 1				İ	
CITY-ST-ZIP TITLE	MIMINI FL 3313	<u>/</u>	DELFTE	3.4. C/TY 4.1 TITLE		· ZII'	T	Char	nge	Addition	
NAME			<u></u>	4. 2 NAM			_				
STREET ADDRESS				4.3 STREE		DORESS				í	
CITY-ST-ZIP				4.4 CITY	-51-	-7IP					
TITLE			DELETE	5 1 TITLE				Chan	ige T	Addition	
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREE							
CITY-ST-ZIP TITLE			DELETE	5.4 CITY - 6.1 TITLE		· ZIP		Chan	ine	Addition	
NAME .			ii) breat	6.2 NAME			L	_ 2000	.a		
OTDECT MODRES				0.5 11/1/11	- 1	INDDEED				\ 	

14. Thereby 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 supplicated annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 appears with an address.

64 CHY-ST-7P

417/98

264-9264

**FILED** 

Apr 14 1998 8:00am

Secretary of State