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

PROFÍT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V60877

(0)

LEAR MIAMI, INCORPORATED

FILED
Feb 27 1998 8:00am
Secretary of State

(210) 308-8424

	WATER COLUMNIC							
Principal Place of Business			Mailing Address				- LAGEN BINDIA BININ GONET MOLIT KOBIN 400% BIRBU BIRBU BIRBU BIRBU BIRBU BIRBU BIRBU BIRBU BIRBU	
C/O AGUSTIN PEREZ-CERVERA 2701 LEJEUNE ROAD. #401 CORAL GABLES FL 33134		2	C/O AGUSTIN PEREZ-CERVERA 2701 LEJEUNE ROAD. #401 CORAL GABLES FL 33134				DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified 08/31/1992	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For	
21			Suite, Apt. #, etc				65-0357374 Not Applicable	
Suite, Apt. #, etc.			27				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution Added to Fees	
Zip Country			Zip Country			8. This corporation owes or has paid the current year Intangible		
24	25	29 30		30	,		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
	9. Name and Address of Co	tered Agent		81	Name	10. Name and Adoress of New Registered Agent		
	rez-cervera, agustin D1 lejeune road, #401				82		One (D.O. Boy Number is Net Acceptable)	
CORAL GABLES FL 33134					83	Street Addre	ess (P.O. Box Number is Not Acceptable)	
					64	City	FL 85 Zip Code	
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, typed or peniestrance of registered agent and the diagraphiable. (NOTE flegistered Agent signature required when reinstating) DATE								
12,		S AND DIREC		13.	u Agei	ni signatora requita	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD		DELETE	1.1 Tr	TLE		Change Addition	
NAME	LEAR, WILLIAM P JR.			1.2 N/	AME			
STREET ADDRESS	2701 LEJEUNE ROAD, #			1		ADDRESS		
CITY-ST-ZIP TITLE	CORAL GABLES FL 3313		DELETE	1.4 CI 2.1 TI		T-ZIP	Change Addition	
NAME			C Detecti	2.1 N				
STREET ADDRESS						ADDRESS		
CITY-S1-7IP						ST-ZIP		
TITLE			☐ DELETE	3.1 TI			Change Addition	
NAME				3.2 N/		*DCDCCC		
STREET ADDRESS CITY-ST-ZIP						ADDRESS ST-ZIP		
TITLE			DELETE	4.1 19		11-28	Change Addition	
NAME				4. 2 N	AME			
STREET ADDRESS				4.3 \$1	TREET	ADDRESS		
CITY-ST-ZIP					TY-S	T-ZIP		
TITLE			∐ DELETE	5 1 TI			Change Addition	
NAME STREET ADDRESS				52 N/		ADDRESS		
CITY-ST-ZIP					TY-51	i		
TITLE			DELETE	617/			☐ Change ☐ Addition	
NAME				6 2 N/	AME			
STREET ADDRESS				6381	IREET	ADDRESS		
CITY-ST-ZIP			i			1-ZIP	Deather 440 07/0V/) Florida Outube 14 de actividad de 147	
14. I hereby certify that the information supplied with this filling 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 suppliemental 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.								

HEAR WILLIAM PLEAR