

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000086019

**Entity Name:** PROFITS BUSINESS LLC

**Current Principal Place of Business:**

16745 CAGAN CROSSING BLVA  
SUITE 102-B #75  
CLERMONT, FL 34714

**Current Mailing Address:**

16745 CAGAN CROSSING BLVA  
SUITE 102-B #75  
CLERMONT, FL 34714 US

**FEI Number:** 45-3167224

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CAVALIERI, JEANETTE  
16745 CAGAN CROSSING BLVA  
SUITE 102-B #75  
CLERMONT, FL 34714 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CAVALIERI, JEANETTE  
Address 16745 CAGAN CROSSING BLVA  
SUITE 102-B #75  
City-State-Zip: CLERMONT FL 34714

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAVALIERI, JEANETTE

MGRM

01/10/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date