# 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 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID W HALL

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

05/03/2016

Certificate of Status Desired: Yes

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:

Oncer/Director Detail.			
Title	Ρ	Title	VP
Name	HALL, DAVID W.	Name	BURKE, STEVE
Address	609 S KELLY AVE SUITE E-8	Address	609 S KELLY AVE SUITE E-8
City-State-Zip:	EDMOND OK 73003	City-State-Zip:	EDMOND OK 73003

# 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L86549

Entity Name: PROFIT CONCEPTS MANAGEMENT, INC.

#### Current Principal Place of Business:

609 S KELLY AVE SUITE E-8 EDMOND, OK 73003

### Current Mailing Address:

609 S KELLY SUITE E8 EDMOND, OK 73003 US

## FEI Number: 65-0220906

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US

Date

Date