

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000067519

**Entity Name:** PRESTIGE TRAVEL SYSTEMS, INC.

**Current Principal Place of Business:**

2803 W. BUSCH BLVD - STE. 100  
TAMPA, FL 33618

**Current Mailing Address:**

2803 W. BUSCH BLVD - STE. 100  
TAMPA, FL 33618

**FEI Number:** 59-3660366

**Certificate of Status Desired:** No

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

EVANS, PAMELA  
2803 W. BUSCH BLVD - STE. 100  
TAMPA, FL 33618 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LASCALA DETORE, KIMBERLY  
Address        2803 W. BUSCH BLVD - STE. 100  
City-State-Zip: TAMPA FL 33618

Title            ST  
Name            EVANS, PAMELA  
Address        2803 W. BUSCH BLVD - STE. 100  
City-State-Zip: TAMPA FL 33618

Title            DIRECTOR  
Name            LASCALA, ANITA  
Address        2803 W. BUSCH BLVD - STE. 100  
City-State-Zip: TAMPA FL 33618

Title            DIRECTOR  
Name            LASCALA, RON  
Address        2803 W. BUSCH BLVD - STE. 100  
City-State-Zip: TAMPA FL 33618

*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:** ANITA LASCALA

**DIRECTOR**

**01/30/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date