

476550

PRESTIGE REALTY INC. 02-08-91		1174
Management Account		63-607/670
Ph. 305 431-3524		
10454 Taft St.		
Pembroke Pines, FL 33026		
PAY TO THE ORDER OF <u>Department of State</u>		<u>4/25</u> 19 <u>97</u>
<u>Thirty Five</u> <u>00/100</u>		\$ <u>35</u> <u>00</u> / <u>100</u>
		DOLLARS
FOR <u>Change of Registered Agent</u>		<u>59-1265410</u>
<u>Prestige Realty, Inc.</u>		<u>Carol Cappello</u>
SunBank/South Florida, N.A. Pembroke Pines Office 10000 Taft Street Pembroke Pines, Florida 33024		
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FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
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OVERPAYMENT
TOTAL 35

Sg 5/14/97

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of Section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both in the State of Florida.

1. The name of the corporation is PRESTIGE REALTY, INC.

1a. Date of incorporation _____ Document number 59-1265140

2. The name and address of the current registered agent and office:

Anthony Cappello
10454 Taft Street Pembroke Pines, FL 33026

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

Carol Cappello
12181 Sheridan Street, Cooper City, Fla. 33026

The street address of its registered agent and the street address of the business office of its registered agent as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

SIGNATURE Carol Cappello
(name and title) President

DATE 4/15/97

Having been named as registered agent and to accept service process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

SIGNATURE Carol Cappello
(Registered Agent)

DATE 4/15/97

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