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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 5

576603

(5)

PRESTIGE MANAGEMENT CORPORATION

FILED Mar 30 1998 8:00am Secretary of State

| Principal Place of Business Mailing Add  |                               |                   |               |   |          |                                 |                   |   | 4 10010) DISEL SABIO DILLA BILLE SASSO INT                                    | OHATE OHATE OLDU A                                  | 1811 B191          | i utidik idak               |  |
|--|-------------------------------|-------------------|---------------|---|----------|---------------------------------|-------------------|---|---|---|--------------------|-----------------------------|--|
| 10031 DEER LN<br>NEW PORT RICHEY FL 34854  |                               |                   |               | 10031 DEER LN<br>NEW PORT RICHEY FL 34654 |          |                                 |                   |   | DO NOT WRITE IN THIS SPACE  |   |                    |                             |  |
|  |                               |                   |               |   |          |                                 |                   | 3.  | . Date Incorporated or Qualified  |   |                    |                             |  |
| 2. Principal P   | . Mailing Address             |                   | <del></del>   |   |          | <b>06/22/1978</b><br>FEI Number |                   | 1   | williad Fac   |   |                    |                             |  |
| 21   |                               |                   |               | 26  |          |                                 |                   | •   | 59-1833406  |   | _                  | pplied For<br>at Applicable |  |
| Suite, Apt.  | #, etc.                       |                   | -  20         | Suite, Apt. #, etc.                       |          |                                 |                   |   | - \$6   |   | Additional         |                             |  |
| 22   |                               |                   | 27            |   |          |                                 | Б.                | . Certificate of Status Desired                     |   |   | equired            |                             |  |
| City & State   |                               |                   |               | City & State                              |          |                                 | 6.                | Election Campaign Financing Trust Fund Contribution |   |   | May Be<br>to Fees  |                             |  |
| I Z∙p  | ip Country                    |                   |               | Zip Cou                                   |          |                                 | ntry              |   | This corporation owes or has pai  | <del>. –                                     </del> |                    |                             |  |
| 24   | 25                            |                   | 29            | 9 30                                      |          | ·                               | ,                 |   | Personal Property Tax due June  |   |                    | No                          |  |
| 9. Name and Address of Current Registered Agent  |                               |                   |               |   |          |                                 |                   | 10.   | , Name and Address of New Reg   |   | 1                  | <del></del>                 |  |
| CURLEY, GERALD M   |                               |                   |               |   |          |                                 | Name              |   |   |   |                    |                             |  |
| 10031 DEER LN  |                               |                   |               |   |          | 82 Street Address (P.           |                   |   | P.O. Box Number is Not Acceptab   | le\   |                    | -                           |  |
| NEW PORT RICHEY FL 34854   |                               |                   |               |   |          | 83                              |                   |   |   |   |                    |                             |  |
|  |                               |                   |               |   |          |                                 |                   |   |   |   |                    |                             |  |
|  |                               |                   |               |   |          | 84                              | City              |   |   | FL 85   | Zip (              |                             |  |
| <ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida.</li> </ol> |                               |                   |               |   |          |                                 | named<br>the corp | l corporatio<br>poration's t                        | on submits this statement for the publicated of directors. I hereby acception | urpose of chan<br>t the appointm                    | ging its<br>ent as | s registered<br>registered  |  |
| SIGNATURE  |                               |                   |               |   |          |                                 |                   |   |   |   |                    |                             |  |
| Signature, typed or profied name of registered agent and title if applicable (NOTE  12. OFFICE'RS AND DIRECTORS  |                               |                   |               |   |          |                                 | nt signature      | a required wher                                     | · · · · · · · · · · · · · · · · · · ·   | DATE  | -0700              | 0.111.40                    |  |
| TITLE  | PD                            | OFFICER           | S AND DINE    | DELET                                     | 1<br>F 1 | 3.<br>1 TITLE                   |                   | 1   | ADDITIONS/CHANGES TO OFFIC  |   | hange              | Addition                    |  |
| NAME   |                               | , GERALD M.       |               |   |          | 2 NAME                          |                   |   |   |   | Kango              | L. Addition                 |  |
|  | STREET ADDRESS 10031 DEER LN  |                   |               | 1.3 STREET A                              |          | ADDBECC                         | İ                 |   |   |   |                    |                             |  |
|  | CRY-SI-ZIP NEW PORT RICHEY FL |                   |               | 1.4 Cl                                    |          |                                 |                   |   |   |   |                    |                             |  |
| TITLE  | D                             |                   |               | DELET                                     |          | 1 TITLE                         | 1-21              |   |   | □ C   | hange              | Addition                    |  |
| NAME   | CURLEY                        | , maria o.        |               |   |          | 2 NAME                          |                   | ]   |   |   | •                  |                             |  |
| STREET ADDRESS   | 10031 D                       |                   |               |   |          |                                 | ADDRESS           | 1   |   |   |                    |                             |  |
| CITY-ST-ZIP  |                               | RT RICHEY FL      |               |   |          | 4 CITY+S                        |                   |   | - ;   | 112   |                    |                             |  |
| TITLE  | VD                            |                   |               | DELETE 3.1 TE                             |          |                                 |                   |   | · · · · · · · · · · · · · · · · · · ·   |   | hange              | Addition                    |  |
| NAME   | CURLEY                        | , DAVID M.        |               |   | 3.2      | 2 NAME                          |                   |   |   |   |                    |                             |  |
| STREET ADDRESS   |                               |                   |               |   | 3.3 \$1  |                                 |                   |   |   |   |                    |                             |  |
| CITY-ST-ZIP  | NEW PO                        | RT RICHEY FL      |               | 3.4. CI                                   |          |                                 | T-ZiP             |   |   |   |                    |                             |  |
| TITLE  |                               |                   |               | DELETI                                    | E 4.     | 1 TITLE                         |                   | [   |   | C   | hange              | ☐ Addition                  |  |
| NAME   |                               |                   |               |   | 4.       | 2 NAME                          |                   |   |   |   |                    |                             |  |
| STREET ADDRESS   |                               |                   |               |   | 4.3      | 3 STREET                        | address           |   |   |   |                    |                             |  |
| City-St-ZiP  |                               |                   |               |   |          | CITY-S                          | T-ZIP             |   |   |   |                    |                             |  |
| TITLE  |                               |                   |               | ☐ DELETI                                  | E 5.     | 1 TITLE                         |                   |   |   |   | hange              | Addition                    |  |
| NAME   |                               |                   |               |   | 5.2      | 2 NAME                          |                   |   |   |   |                    |                             |  |
| STREET ADDRESS   |                               |                   |               |   | 5.3      | STREET                          | address           |   |   |   |                    |                             |  |
| CITY-ST-ZIP  |                               |                   |               | <del></del>                               |          | CITY-S                          | T-ZIP             | ļ   |   |   |                    |                             |  |
| TITLE  |                               |                   |               | ☐ DELETI                                  |          | 1 TITLE                         |                   |   |   | ٥⊔  | hange              | ☐ Addition                  |  |
| NAME   |                               |                   |               |   |          | 2 NAME                          |                   |   |   |   |                    |                             |  |
| STREET ADDRESS   |                               |                   |               |   |          |                                 | ADDRESS           |   |   |   |                    |                             |  |
| CITY-ST-ZIP  | addu that the                 | information event | and with this | rena dan nata.                            |          | CITY-S                          |                   | <br>  | on 110 07/9/// Florido Ctat dos 14  | Locale and a disaster of                            |                    |                             |  |

4. I hereby certify that the information supplied with this filing 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 supplemental 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 an availablement with an address.

SIGNATURE:

Usal of Birly

3/24/98 (8/3).845.245

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