2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 665158

FILED Apr 17, 2008 Secretary of State

Entity Name: PRESTIGE PROPERTIES OF THE PALM BEACHES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	E WORTH RD	SUITE 120		
OUITE 120 AKE WC	u)RTH, FL 33461	1		
urrent N	/lailing Addres	s:	New Mailing Addres	s:
767 LAKI	E WORTH RD S	SUITE 120		
OUITE 120 AKE WC	0)RTH, FL 33461	1		
El Number	r: 59-2033080	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
53 GLEN	, MICHAEL IBROOK DRIVE 3, FL 33462	E. US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
the Stat	e of Florida. RE:	submits this statement for the place of Registered Ag		ed office or registered agent, or both, Date
the Stat	e of Florida. RE: Electron			
n the Stat	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	
n the Stat	e of Florida. RE: Electron mpaign Financing S AND DIRECT	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete HAEL W.,	ent	Date
n the Stat GIGNATU Lection Ca DFFICER Little: ame: ddress:	e of Florida. RE: Electron mpaign Financing S AND DIRECT PS () SAVIDGE, MICH- 453 GLENBROC ATLANTIS, FL	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete HAEL W., DK DRIVE. Delete HAEL W.,	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL W. SAVIDGE P 04/17/2008