## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **G72516**

1. Corporation Name

PRESTIG	GE DEVELOPMENT GROUP	, INC.					
Principal Place of Business		Mailing Address		T (#6)(() #8() (#8() #8() #8() #8()	ŞIBTI BIBTI ĞIL	TEL BIRTH BIRTH (BRI	
C/O MICHAEL L. STEINBERG 2233 N.W. 41ST STREET. SUITE 100 GAINESVILLE FL 32606-3643		C/O MICHAEL L. STEINBERG 2233 N.W. 41ST STREET. SUITE 100 GAINESVILLE FL 32606-3643		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  11/28/1983			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26		59-2366300		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired		5 Additional Required	
City & State		City & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28		Trust Fund Contribution	Adde	ed to Fees	
Zip	Country Zip 25 29 3			у	This corporation owes the current year In     Personal Property Tax.	tangible	□No
24	9. Name and Address of Currer		.,		10. Name and Address of New Registered	Agent	
GAIN	N.W. 41ST STREET, SUITE 100 IESVILLE FL 32606-6643 to the provisions of Sections 607.050 egistered agent, or both, in the State of familiar pith, and accept the obliga-		82 83 84 the above forized by a Statute	City	Address (P.O. Box Number is Not Acceptable)  Floorporation submits this statement for the purpose oration's board of directors. I hereby accept the apporation submits this statement for the purpose oration's board of directors.	_	Zip Code g its registered s registered
SIGNATURE	Signature, typed or printer name of registered age	nt and title if applicable. (NOTE: Re	gistered Ag	nt signature re	equired when reinstating) DATE		
12. OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	
TITLE	DP	☐ DELETE	1,1 TITLE			Chan	ge 🔲 Addition
NAME	STEINBERG, MICHAEL L	·	1.2 NAME				
STREET ADDRESS	2233 NW 41ST STE 100		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	GAINESVILLE, FL 00000		1.4 CITY-	ST-ZIP			
TITLE	DS	☐ DELETÉ	2.1 TITLE			Chan	ige Addition
NAME	STEINBERG, MIRIAM F		2.2 NAME				
STREET ADORESS	2250 1117 1101 012 100		2.3 STREE	T ADDRESS	•		
CITY-ST-ZIP	GAINESVILLE FL		2. 4 CITY-	ST-ZIP			
TITLE	_	DELETE	3.1 TITLE			☐ Chan	ge Addition
NAME	· ·		3.2 NAME		-		
STREET ADDRESS			3.3 STREET ADORESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP		<u> </u>		
TITLE		□ DELETË	4.1 TITLE	i		Chan	nge 🔲 Addition

CITY-ST-ZIP 14. 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 ghanged, or on all attachment with an address, with all other like empowered.

4 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLÉ

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

□ DELETE

☐ Change

Change

☐ Addition

☐ Addition

Mar 16, 1999 8:00 am Secretary of State

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