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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H43256

(7)

PRESTIGE SYSTEMS, INC.

Apr 28 1998 8:00am Secretary of State

**FILED** 

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Principal Place		Mailing Abor	Mailing Address									
4890 BRIGHT	ON DR. .e fl 32217	4850 BRIGHTON DR. JACKSONVILLE FL 32217										
			*···				DO NOT WRITE IN THIS SPACE					
						3	. Date Incorpo		lified			
							03/01/19	185				
2. Principal Pl	ace of Business	2a. Mailing A	ddress			4	. FEI Number					Applied For
	400 0. 200	26					59-253	6232			-	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			-		-				Additional	
<u> </u>	w, 610	<del>-</del>	<del></del>			5	<ol> <li>Certificate of</li> </ol>	l Status Desir	ed L	J		Required
City & State		27 City & Sta	ıto.				Floation Con	analan Cinan	aina			0 May Be
	•	28				•	<ol> <li>Election Can Trust Fund C</li> </ol>			1		d to Fees
Zip	Country	Zip		Country	,		This corpora		<del>-</del>			
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24	25 25 Name and Address of Curr	29 Peopletered Age		<u> </u>		10	). Name and					
		on nogistored Age		81	Nam		, , , , , , , , , , , , , , , , , , , ,					
	KENNA, RICHARD P.				. ,,,,,,,,,,							·
	22 ARLINGTON ROAD			82	Stree	et Address (	(P.O. Box Num	ber is Not Ac	ceptable)			-
JAI	CKBONVILLE FL 32211			83	<u> </u>							
				63	ĺ							
				84	City						85 Zij	p Code
					L					FL		
11. Pursuant t	to the provisions of Sections 607.0 egistered agent, or both, in the St	1502 and 607.1508, F	lorida Statutes	, the above	e-name	ed corporation's	ion submits this heard of direc	s statement fo	or the purp- v accept th	ose of c	nanging ntment r	its registered
agent. I ar	m <b>fa</b> miliar with, and accept the ob	ligations of, Section 6	607.0505, Florid	da Statutes	S.	orporation o	Board or direc	NOID: THORDE,	, accept to	о арро		aa v <b>o</b> glotoroo
SIGNATURE												
oldinations ,	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: F		ent signat	ture required whe				ATE		
12.		AND DIRECTORS		13.		1	ADDITIONS/C	CHANGES TO	OFFICER		_	
TITLE	TSD	L	) DELETE	1.1 TITLE						L.	_ Change	e L Addition
NAME	DAILEY, KRYSTEL T.			1.2 NAME								
STREET ADDRESS	4850 BRIGHTON DR.			1.3 STREET	ADDRES	s						
CITY-ST-ZIP	JACKSONVILLE FL			1.4 CITY - S	T-ZIP							
TITLE	PVD		DELETE	2.1 TITLE						L	_] Change	e LAddition
NAME	Dailey, Sam, Jr			2.2 NAME								
STREET ADDRESS	4850 BRIGHTON DR.			2.3 STREET	ADDRES	s						
CITY-ST-ZIP	JACKSONVILLE FL			2. 4 CiTY-	ST-ZIP							
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CITY-ST-ZIP	l. <u></u>			6.4 CITY - 9	ST-ZIP							
							440 07/0V	·			e - al a e	ha information

I. 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 on an attachment with an address.