

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
May 24, 2007 8:00 am
Secretary of State

04-30-2007 90072 039 ****55.00

DOCUMENT # L05000005523 1. Entity Name PRESTIGE CONSTRUCTION GROUP, LLC					
Principal Place of Business 1023 NW 3RD AVENUE MIAMI, FL 33136			Mailing Address 1023 NW 3RD AVENUE MIAMI, FL 33136		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-2191604	
Zip		Country		5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent PRESTIGE ENTERPRISE GROUP, INC. 1023 NW 3RD AVENUE MIAMI, FL 33136				7. Name and Address of New Registered Agent Name Ingrid Yuken Street Address (P.O. Box Number is Not Acceptable) 10101 Collins Avenue, #9A City Bal Harbour FL 33154	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Ingrid Yuken</u> 4-20-07 Signature, typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when re-nesting) DATE					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PRESTIGE ENTERPRISE GROUP, INC. 1023 NW 3RD AVENUE MIAMI, FL 33136	☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Managing Member D. S&R Investment, LLC 10101 Collins Avenue, #9A Bal Harbour, FL 33154
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NELSON, DAVID 1023 NW 3RD AVE MIAMI, FL 33136	☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member DIRECTOR JFMF Holdings, LLC. c/o Joel Friedland 9999 Collins Avenue Bal Harbour, FL 33154
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member DIRECTOR Moreno Habit 1440 South Biscayne Point Miami Beach, FL 33141
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>Ingrid Yuken</u>				4-20-07 (305) 374-4442	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Date Daytime Phone #	