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Mar 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L29787** **(3)**

1. Corporate Name
PRESTA I, INC.

Principal Place of Business
1400 E. NEWPORT CENTER, SUITE 209
DEERFIELD BEACH FL 33442

Mailing Address
1400 E. NEWPORT CENTER, SUITE 209
DEERFIELD BEACH FL 33442-7713

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip 29 Country 30

3. Date Incorporated or Qualified: **11/13/1989**
3a. Date of Last Report: **05/01/1996**
4. FEI Number: **65-0175461** Applied For / Not Applicable
5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**
KAY, JAMES R P.A.
2000 PALM BEACH LAKES BLVD
SUITE 1002
WEST PALM BEACH FL 33409

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I hereby accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE (Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	REIBLING, LORENZ	
STREET ADDRESS	1400 E NEWPORT CNTR DR., STE 209	
CITY, ST, ZIP	DEERFIELD BCH FL 33442	
TITLE	VSTD	☐ DELETE
NAME	REIBLING, GUENTHER	
STREET ADDRESS	1400 E. NEWPORT CNTR DR., STE 20	
CITY, ST, ZIP	DEERFIELD BEACH FL 33442	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer of the corporation or a 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.

SIGNATURE: VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-97
Date

954-425-9055
Daytime Phone #

CR2E034 (9/96)

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