

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

MCBP

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90107 004 ***158.75

DOCUMENT # **L29787**

i. Corporation 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**



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

3. Date Incorporated or Qualified

11/13/1989

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 owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

**KAY, JAMES R P.A.
777 SO FLAGLER DR EAST TOWER
SUITE 900
WEST PALM BEACH FL 33401**

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

Pursuant to the provisions of Sections 607.0502 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PD
REIBLING, LORENZ
1400 E NEWPORT CNTR DR., STE 209
DEERFIELD BCH FL 33442

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

VP

Riley, Rodney A.

100 S. Orange Avenue

Orlando, FL 32801

☐ Change

☐ Addition

VSTD
REIBLING, GUENTHER
1400 E. NEWPORT CNTR DR., STE 20
DEERFIELD BEACH FL 33442

☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

VPAS

Kassof, Linda G.

1400 East Newport Center Drive

Deerfield Beach, FL 33442

☐ Change

☐ Addition

VP
RILEY, RODNEY A
100 S ORANGE AVE
ORLANDO FL 32801

☐ DELETE

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

VPAS

KASSOF, LINDA G

1400 E NEWPORT CENTER DR

DEERFIELD BEACH FL 33442

☐ Change

☐ Addition

VPAS
KASSOF, LINDA G
1400 E NEWPORT CENTER DR
DEERFIELD BEACH FL 33442

☐ DELETE

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

VPAS

KASSOF, LINDA G

1400 E NEWPORT CENTER DR

DEERFIELD BEACH FL 33442

☐ Change

☐ Addition

☐ DELETE

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

VPAS

KASSOF, LINDA G

1400 E NEWPORT CENTER DR

DEERFIELD BEACH FL 33442

☐ Change

☐ Addition

☐ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VPAS

KASSOF, LINDA G

1400 E NEWPORT CENTER DR

DEERFIELD BEACH FL 33442

☐ Change

☐ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/99

Date

Daytime Phone #

CR2E034 (1/98)