

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 JAN 20 AM 8:39

DOCUMENT # **L36611** (6)  
1. Corporation Name  
**PRESTON, INC.**

Principal Place of Business Mailing Address  
**218 COMMERCIAL BLVD.  
203  
LAUDERDALE BY THE SEA FL 33308  
US** **C/O VICTORIA I. PRISTO  
218 COMMERCIAL BLVD. SUITE 203  
LAUDERDALE-BY-THE-SEA FL 33308-4462**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2a. Mailing Address  
21 26  
22 27  
23 28  
24 29 30

3. Date Incorporated or Qualified **12/15/1989** 3a. Date of Last Report **03/25/1994**  
4. FEI Number **65-0163170** 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  
**PRISTO, VICTORIA I.  
218 COMMERCIAL BLVD. SUITE 203  
LAUDERDALE-BY-THE-SEA FL 33308**

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 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	<b>D</b>
NAME	<b>PRISTO, VICTORIA I.</b>
STREET ADDRESS	<b>218 COMMERCIAL BLVD. 203</b>
CITY - ST - ZIP	<b>LAUDERDALE-BY-SEA FL</b>
TITLE	<b>D</b>
NAME	<b>PRISTO, CHRISTINE M.</b>
STREET ADDRESS	<b>218 COMMERCIAL BLVD. 203</b>
CITY - ST - ZIP	<b>LAUDERDALE-BY-SEA FL</b>
TITLE	<b>D</b>
NAME	<b>PRISTO, LORI A</b>
STREET ADDRESS	<b>218 COMMERCIAL BLVD 203</b>
CITY - ST - ZIP	<b>LAUDERDALE BY SEA FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>DELETE</b>
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>DELETE</b>
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated in 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; that I am authorized by the board of directors or the trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or on an attached report, with an address.

SIGNATURE: \_\_\_\_\_ DATE: **1/12/95** **305 7716600**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR