

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L36611** (6)

1. Corporation Name  
**PRESTON, INC.**



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

21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt. #, etc	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Zip
25	Country	30	Country

3	Date Incorporated or Qualified	3a	Date of Last Report
	<b>12/15/1989</b>		<b>01/20/1995</b>
4	FBI Number	Applied For / Not Applicable	
	<b>65-0163170</b>		
5	Certificate of Status Desired	<input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8	This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>PRISTO, VICTORIA I. 218 COMMERCIAL BLVD. SUITE 203 LAUDERDALE-BY-THE-SEA FL 33308</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	<b>FL</b>	85

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 \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>D PRISTO, VICTORIA I.</b>	12 NAME	<b>D/P PRISTO, ROBERT E.</b>
STREET ADDRESS	<b>218 COMMERCIAL BLVD. 203</b>	13 STREET ADDRESS	<b>218 COMMERCIAL BLVD. 203</b>
CITY-ST-ZIP	<b>LAUDERDALE-BY-SEA FL</b>	14 CITY-ST-ZIP	<b>LAUDERDALE BY THE SEA FL 33308</b>
TITLE	<input type="checkbox"/> DELETE	2 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	<b>300001848303</b>
STREET ADDRESS		63 STREET ADDRESS	<b>-06/03/96--01056--003</b>
CITY-ST-ZIP		64 CITY-ST-ZIP	<b>***400.00</b>

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 119.07(3)(k), 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; that I am 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.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 4, 1996 954-771-6600

CR2E034 (12/95)