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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # L54001

PRESTIGE GROUP INTERNATIONAL, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90180 029 ***150.00

Principal Place	of Business	Mailing Address						
11601 BISCAYNE BLVD 11601 BISCAYNE BLVD								
MIAMI FL 33181					DO NOT WRITE IN THIS SE	DO NOT WRITE IN THIS SPACE		
DA MIAMI FL 33181 US					3. Date Incorporated or Qualifed			
					03/01/1990			
2. Principal Pl	lace of Business	2a. Mailing Addrass			4. FEI Number	Ap	plied Far	
21 100 2 NE 116 ST 28 PO BOX 6			12154		65-0174148	No	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75	Additional	
27					5. Certificate of Status Desired	Fee Re	quired	
City & State City & State			 /		6. Election Campaign Financing	\$5.00	May Be	
23 MIA	MIAMI 1-1 28/MIAMI		<u> </u>		Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip //	Country	<u> </u>	8. This corporation owes the current year Intan-			
24 33 /	61 25 DADE	29 33 26/ 30	100	WE -	1 displiant laborty tax:	Yes	□No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Ag	ent		
	0000 4070000		81	Name				
GREGORY, MITCHELL				Street A	ddress (P.O. Box Number is Not Acceptable)		_	
1002 NE 116TH ST								
MAIM	AI FL 33161		83					
			84	City		85 Zip (Code	
			04	City	FL	00	3040	
SIGNATURE	m familiar with, and accept the obligation of th	ent and title if applicable. (NOTE: Re	gistered Ager		juired when reinstating) DATE			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO Change	RS IN 12	
TITLE	DP .	☐ DELETE	1.1 TITLE		<i>0 f</i>	My Change		
NAME	GREGORY, MITCHELL V.		1.2 NAME		GREGORY, MITCHELL V		}	
STREET ADDRESS	11601 BISCAYNE BLVD		1.3 STREE		100 2 NE 116 E		:	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-\$	T-ZIP	MIAMI FL 3316/	D.ehanaa	□ Addition	
TITLE	DVS	☐ DELETE	2.1 TITLE	-		S -Change	☐ Addition	
NAME	GREGORY, DIANE C.		2.2 NAME	(GREGORY, DIANE			
STREET ADDRESS			2.3 STREE	ADDRESS	(DREGORY, DIANKE 1002 NE 116 ST MIAMI FL 33161			
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-S	T-ZIP	MIAMI FC 33/6/			
TITLE		☐ DELETE	3.1 TITLE		ľ	Change	Addition	
NAME			3.2 NAME	l				
STREET ADDRESS			3.3 STREE	F ADDRESS				
CITY-ST-ZIP			3.4, CITY-5	T-ZIP		704		
TITLE		☐ DELETE	4.1 TITLE		l	Change	Addition	
NAME		,	4. 2 NAME					
STREET ADDRESS			4.3 STREE	ADDRESS				
CITY-ST-ZIP_			4.4 CITY-S	T-ZIP				
TITLE]	☐ DELETE	5.1 TITLE		Į	Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	61 TITLE			Change	☐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP		;	6.4 CITY-S	T-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 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 open attachment with an address, with all other like empowered.

SIGNATURE:

TORRESTALURED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Daytime Phone #

=":