

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L77178 (6)

1. Corporation Name

PRESTIGE MAINTENANCE, INC.

Principal Place of Business
10397 SOUTHERN BOULEVARD
ROYAL PALM BEACH, FL 33411

Mailing Address
10397 SOUTHERN BOULEVARD
ROYAL PALM BEACH, FL 33411

3. Date Incorporated or Qualified 06/01/1990
3a. Date of Last Report 04/04/95

2. Principal Place of Business
21 10323 SOUTHERN BLVD.

2a. Mailing Address
26 10323 SOUTHERN BLVD.

4. FEI Number 65-0206702
Applied For Not Applicable

Suite, Apt. #, etc.

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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 City & State
ROYAL PALM BEACH, FL

27 City & State
ROYAL PALM BEACH, FL

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip 33411
25 Country USA

29 Zip 33411
30 Country USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ABLE, DIANE L.
10397 SOUTHERN BLVD.
ROYAL PALM BEACH, FL 33411

10. Name and Address of New Registered Agent

81 Name PATRICIA BALCH
82 Street Address (P.O. Box Number is Not Acceptable) 10323 SOUTHERN BOULEVARD
83
84 City ROYAL PALM BEACH FL 85 Zip Code 33411

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 *Patricia Balch* PATRICIA BALCH 4-25-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	AUSTIN, CHRISTOPHER	
STREET ADDRESS	10397 SOUTHERN BOULEVARD	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	V	<input type="checkbox"/> DELETE
NAME	EVANS, RICHARD	
STREET ADDRESS	10397 SOUTHERN BOULEVARD	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	ABLE, DIANE	
STREET ADDRESS	10397 SOUTHERN BOULEVARD	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	ST <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	BALCH, PATRICIA
3.3 STREET ADDRESS	10322 SOUTHERN BOULEVARD
3.4 CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411 <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	700001811717
4.4 CITY-ST-ZIP	-05/07/96--01125--007 <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	***200.00
5.2 NAME	5/1/96
5.3 STREET ADDRESS	CE
5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	
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 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 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.

SIGNATURE: *Patricia Balch* Patricia Balch

4/25/96
Date

(407) 790-1414
Daytime Phone #

CR2E034 (12/95)