FOR PROFIT CORPORATION

120

	NIFORM BUSINI	ESS REPORT	「(UBR)		•	•	10
DOCL	MENT # P000000	04921			,		
1. Entity Name JM PRESTIGE INVESTMENTS INC.					FILED		
			· 		02 OCT	-2 PH 12:	: 23
			in the		ernot."	LARY OF ST	ALE
	DO NOT WRITE	IN THIS S	PACE		300008 190008	TARY OF ST ASSEE, FLO	ORIDA I⇒•=
2. Principal I	Place of Business	3. Mailing Address	<u></u>		-10/i	1702010)84010 *
	ox 824037		P.O. Box 824037			150.00 *	***150.00
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	·		DO NOT V	WRITE IN THIS SI	PACE
City & State City & State					4. FEI Number	Applied For	
PEMBROKE PINES FL.		PEMBROKE PINES FL		65-097547	8	Not Applicabl	
330 8 2	Country STATES	Zip 33082	Country UNITED	TATES	5. Certificate of Status Desire		8.75 Additional
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		All of the second	Name		MES A. MESTOON	2	
الم المراجعة	DO NOT W	RITE	Street		O. Box Number is Not Accept		<u> </u>
	IN THIS SF	DACE		-		·	
dy.			164	95 S.	W. 20TH ST.		
			City	TRAM	IAC	FL	Zip Code 33027
8. The alpove	named entity submits this statement fo	r the purpose of changing its	registered office				133027
/ \	\backslash $/$ $/$ $/$ $/$	- N -		g	- Lagerry or Deliny in the State of	Tionou.	
SIGNATURE	X ames Cosolil JAr	165 ESTDOR -)	RESIDENT		•	10-0	11-02
-	Signature, typed or printed name of registered agent		E: Registered Agent sign		when reinstating)	DATE	
	oration is eligible to satisfy its Intangible		lay 1 Fee is \$1 1, Fee is \$550.0		10. Election Campaign	Financing	\$5.00 May Be
	requirement and elects to do so.	Amende	d UBR is \$61.25		Trust Fund Contrib	~	Added to Fees
11.	. OFFICERS AND	Make Check Payat	ile to Departme	nt of State	9 x 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	————————————————————————————————————	
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NAME Street address			NAME STREET ADDRESS	' "		The state of the s	
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13. I hereby o	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for		ated in Sect	tion 119.07(3)(i), Florida Statute	es. I further certify	that the information
indicated	on this report or supplemental report is	true and accurate and that m	iv signature shall l	have the sa	me lengt offect as if made und	ar aath, that I am	an affiner or ellerates

SIGNATURE:

Florida Department of State Secretary Of State Division of Corporations Annual Report/Reinstatement Section P O Box 6327 Tallahassee, Fl 32314-6327

Dear Sir:

As per our telephone conversation we are enclosing you a money order for the amount of \$ 150.00 dollars.

Please be advised as mentioned on the phone, we have renewed our corporation every year on the year but this particular year 2002 we did not received the annual report., so, therefore we are pleading you to absolve the penalty charges.

Please if you have any question do not hesitate to contact us.

(PRESIDENT) DOCT POODOOD 4921