

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028809

Entity Name: PRESTIGE ELEVATOR CO.

FILED  
Jan 03, 2008  
Secretary of State

## Current Principal Place of Business:

10660 NW 124TH ST. RD  
STE 106  
MEDLEY, FL 33166

## New Principal Place of Business:

10660 NW 123RD ST. RD  
STE 106  
MEDLEY, FL 33178

## Current Mailing Address:

10660 NW 124TH ST. RD  
STE 106  
MEDLEY, FL 33166

## New Mailing Address:

10660 NW 123RD ST. RD  
STE 106  
MEDLEY, FL 33178

FEI Number: 65-0998191

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCIA, IDA M  
610 NW 206TH AVE  
PEMBROKE PINES, FL 33029 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GARCIA, JORGE L  
Address: 610 NW 206TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP ( ) Delete  
Name: WIFREDO, MEDINA  
Address: 1165 SW 117TH WAY  
City-St-Zip: DAVIE, FL 33025

Title: S ( ) Delete  
Name: MEDINA, MAYRA  
Address: 11655 SW 117TH WAY  
City-St-Zip: DAVIE, FL 33025

Title: TD ( ) Delete  
Name: GARCIA, IDA M  
Address: 610 NW 206TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: GARCIA, JORGE L JR.  
Address: 610 NW 206TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IDA M. GARCIA

TD

01/03/2008

Electronic Signature of Signing Officer or Director

Date