-30-2004(FRI) 10:00

FILED
Aug 10, 2004 8:00 am
Secretary of State

05-10-2004 90458 025 ***158.75

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000113331

Entity Name
PRESTIGE INSURANCE ENTERPRISES, INC.

66431689

Principal Place of Business	Mailing Address
5001 S. FEDERAL HIGHWAY UNIT C FORT PIERCE, FL 34982	5001 S. FEDERAL HIGHWAY UNIT C FORT PIERCE, FL 34982

04282004 No Chg-P CR2E[illegible]4 (10/03)

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4. FEI Number
59-3495731
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LEE, BRENDA L
1982 SW JULIET
PORT ST. LUCIE, FL 34983

DO NOT WRITE IN THIS SPACE

7. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: President DATE: 8/3/04

Signature, typed or printed name of individual and title if applicable. Registered Agent signature required when reinstating.

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LEE, BRENDA L
STREET ADDRESS	240 SE TODD AVENUE
CITY-ST-ZIP	PORT ST. LUCIE, FL 34983
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: President 8/3/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
66431686

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 19, 2004

PRESTIGE INSURANCE ENTERPRISES, INC.
5001 S. FEDERAL HIGHWAY
UNIT C
FORT PIERCE, FL 34982

Subject: **PRESTIGE INSURANCE ENTERPRISES, INC.**

Reference Number: **P01000113331**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $158.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE $400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RJ
ANNUAL REPORTS SECTION