

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State
 05-01-2002 91496 039 ***150.00

DOCUMENT # P01000114320

1. Entity Name

PRESTAR HOMES & RENTALS, INC.

Principal Place of Business

**570 CALIBER CREST #104
 ALTAMONTE SPRINGS FL 32714**

Mailing Address

**570 CALIBER CREST #104
 ALTAMONTE SPRINGS FL 32714**

2. Principal Place of Business

6309 Hillwood Dr.

3. Mailing Address

6309 Hillwood Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, Florida

City & State

Orlando, Florida

4. FEI Number

26-0002308

☒ Applied For

☐ Not Applicable

Zip

Country

32809

USA

Zip

Country

32809

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MCNAIR, DJUANA

570 CALIBER CREST #104

ALTAMONTE SPRINGS FL 32714

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **DT** ☐ Delete
 NAME **MCNAIR, DJUANA**
 STREET ADDRESS **570 CALIBER CREST #104**
 CITY-ST-ZIP **ALTAMONTE SPRINGS FL 32714**

TITLE **VS** ☐ Delete
 NAME **JOHNSON, CURTIS**
 STREET ADDRESS **570 CALIBER CREST #104**
 CITY-ST-ZIP **ALTAMONTE SPRINGS FL 32714**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DT** ☒ Change ☐ Addition
 NAME **MCNAIR, DJUANA**
 STREET ADDRESS **6309 Hillwood Dr.**
 CITY-ST-ZIP **Orlando, Florida 32809**

TITLE **VS** ☒ Change ☐ Addition
 NAME **Johnson, Curtis**
 STREET ADDRESS **6309 Hillwood Dr.**
 CITY-ST-ZIP **Orlando Florida 32809**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Djuana Mcnair **Djuana Mcnair** **4/15/02** **321.689.4571**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)