

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000079651

1. Entity Name
PRESTIGE SUPPLIES, INC.



FILED
08 MAR 25 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**5635 COMMERCE DV.
ORLANDO, FL 32839**

Mailing Address
**5635 COMMERCE DV.
ORLANDO, FL 32839**

2. Principal Place of Business - No P.O. Box #
9484 Boggay Creek Rd

3. Mailing Address
SAME

Suite, Apt. #, etc.



City & State
ORLANDO, FL

Zip
32824

Country
USA

4. FEI Number
20-0000482

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**BRANCO, MICHAEL
5635 COMMERCE DV.
ORLANDO, FLORIDA, FL 32839**

7. Name and Address of New Registered Agent

Name
SAME

Street Address (P.O. Box Number is Not Acceptable)
9484 Boggay Creek Rd

City
Orlando

State
FL

Zip Code
32824

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

SIGNATURE *Michael Branco* DATE **3/20/08**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	BRANCO, MICHAEL	
STREET ADDRESS	5635 COMMERCE DV.	
CITY-ST-ZIP	ORLANDO, FL 32839	
TITLE	V	<input type="checkbox"/> Delete
NAME	BRANCO, MAURO	
STREET ADDRESS	5635 COMMERCE DV.	
CITY-ST-ZIP	ORLANDO, FL 32839	
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		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANCO, MICHAEL	
STREET ADDRESS	9484 Boggay Creek Rd	
CITY-ST-ZIP	ORLANDO, FL 32824	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANCO, MAURO	
STREET ADDRESS	9484 Boggay Creek Rd	
CITY-ST-ZIP	ORLANDO, FL 32824	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Michael Branco* DATE: **3/20/08** DAVINIA PHONE #: **407-857-7089**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR