


**FILED**  
**May 21, 2007 8:00 am**  
**Secretary of State**

04-19-2007 90409 049 \*\*\*150.00

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P04000083081</b>		
1. Entity Name <b>PRESTIGE CONSULTING &amp; DEVELOPING, INC.</b>		
Principal Place of Business <b>3021 NE 46TH ST. FT. LAUDERDALE, FL 33308</b>		Mailing Address <b>3021 NE 46TH ST. FT. LAUDERDALE, FL 33308</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>SINGER, BERNARD A 3107 STIRLING RD., SUITE 105 FT. LAUDERDALE, FL 33312</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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: <u><i>Bruce Leibo</i></u> DATE: <u>4-14-07</u> <small>Sign in ink, typed or printed name of registered agent is acceptable. (NOTE: Registered Agent signature required when reappointing)</small>		
<b>FILE NOW!!! FEE IS \$150.00 After May 11, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEMO, JANICE 3021 NE 46TH ST. FT. LAUDERDALE, FL 33308	
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		
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: <u><i>Bruce Leibo</i></u> DATE: <u>4-14-07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		

66015999



03272007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**20-1166563**

Applied For
Not Applicable

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