2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE:

Apr 23, 2008 08:00 AN Secretary of State **DOCUMENT # P04000083081** PRESTIGE CONSULTING & DEVELOPING, INC. Principal Place of Business Mailing Address 3021 NE 46TH ST. 3021 NE 46TH ST. FT. LAUDERDALE, FL 33308 FT. LAUDERDALE, FL 33308 CR2E034 (11/05) 04162008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 20-1166563 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SINGER, BERNARD A 3107 STIRLING RD., SUITE 105 FT. LAUDERDALE, FL 33312 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000916430 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10 OFFICERS AND DIRECTORS TITLE LEMBO, JANICE NAME STREET ADDRESS 3021 NE 46TH ST. FT. LAUDERDALE, FL 33308 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 of an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED