## 2008 FOR PROFIT CORPORATION

## **FILED** Apr 21, 2008 08:00 A ate

		AITITUAL I	KEPORI		_	-	Sacr	atary of St
DOCU		050001193		Secretary of S				
PRODIGY ENTERPRISES CORPORATION								
965 S BAYSI	cof Business HORE BLVD BOR, FL 34695	,	Mailing Address 965 S BAYSHORE BLVD SAFETY HARBOR, FL 34695			erini onini ankir ngiji ng	 	1189 HHIN OCOUL (NIJURE); (1 1884
	· · · · · · · · · · · · · · · · · · ·		Salah Karabar Salah Karabar Karabaran Jamasa Salah		02072008	No Chg-P		34 (11/05)
C	O NOT	WRITE	IN THIS SPA	CE	4. FEI Numbe 20-339	er		Applied For Not Applicable
			(Carried Market)		5. Certificate	of Status Desired		\$8.75 Additional Fee Required
	6. Name and A	ddress of Current Rep	gistered Agent					
	PETER /SHORE BLVD /ARBOR, FL 34	4695			NOT W		Service Homography of Service Modern Co. Service Modern Co. Ser	
	named entity submitions of registered a		e purpose of changing its registe	red office or register	red agent, or bot	n, in the State of Fi	lorida. I am	
	ilons ui regisiereu a	geni.						
SIGNATURE.	Skinabire, typed or pivited	I name of registered agent and I	red Agent signature required	d when reinstating)		DATE		
FIL After M	E NOW!!! FEE ay 1, 2008 Fee	IS \$150.00 will be \$550.00		.00 May Be led to Fees				
10.	T .	OFFICERS AND DIF	RECTORS		<del></del> ≾. * /չ:			ando samanja o
PINE PAME SHERICAL FEBRICA PINE-USE-LIGHT	P POLITIS, PETE 965 SOUTH BA SAFETY HARB	YSHORE BLVD		i visa. Prinsen Maren				5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -
HITTE NAME STREET ABOUTS CHT-STEZIP								
THE CAME SHEELAN MESS Office Land						NOT W	/RITI	er en regenski sen ekent e 1. ogsåge ekkelent i En ganga sen sikreten et e En ganga se skreten er e
DITE KAME SUBJETADORESS OUT-ST-70			,		IN 1	THIS SI		तरे व्यवस्थान विश्व के व त्या के विश्व के विश्
TATE MAME STEPFE APORESS CHY+SE-ZIP	·	٠			المعتقم المرجان			in angga ngga san sain sa a angga nagga san sain sa angga san sain sain sain sain angga san sain sain sain sain
NAME SHRELLARDORS OUT-SE-ZID	•	••	••	The solutions in the solution of the solution	4.20.0.942			Tall the trade of the state of

12. Thereby 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 included on this report of 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 of the receiver or flustee 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 pilier like empowered.

SIGNATURE:

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR

4-15-08