FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

多andra 马. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # P93,00045407

FILED Apr 22 1997 8:00am Secretary of State

1. Corporatio	n Name							
Pres	tige ventures,	inc.						
	9							
Principal Plac		Mailing Address						
	orth New York Ave.							
Sulte I					j			
Winter Park, F1 32789					3. Date incorporated or Qualified 8. Date of Last Report 8/5/44			
2. Principal Place of Business		2a. Mailing Address		······································	4. FEI Number 59 - 3191324	 	pplied For	ļ
Suite, Apt #, etc		Suite, Apt. #, etc.			31 311321		lot Applicable	1
22		27			5. Certificate of Status Desired		Additional legulred	١
City & State		City & State			Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution		to Fees	
Zip	Country	Zip	Count	ry	8. This corporation has liability for		s. 199.032.	
24	25	29	30			Yes 🔣 No		
	9. Name and Address of Curre			1 Name	10. Name and Address of New Ro	igistered Agent		ļ
Do.	ights Rose		L.					1
507	N. New YORK AVE		8	2 Street Add	ress (P.O. Box Number is Not Accepta	ble)		
. Gwi	H # 302		8	3				1
W's	NU PAUR 191 32789		8	4 City		FI 85 Zip	Code	
11 Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Stat	utes, the abo	ve-named corp	poration submits this statement for the	ournose of changing	its registered	
office or r	egistered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was jations of, Secti <u>on 6</u> 07.0505, I	s authorized Florida Statul	by the corporaties.	tion's board of directors. I hereby acce	pt the appointment as	s registered	
SIGNATURE	2					1/10/97		ĺ
	Signature, typed or support affector of registered ag	ent and tine if applicable (N	OTE: Registered A	igent signature requi	red when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO		R2E034 (9/96)
TITLE NAME	Rosw Stuhen	L Deceie	1.1 Titli 1.2 Nam	ſ		L., Criange	Addition	0
STREET ADDRESS	ا ع لما صرح			ET ADDRESS				g
CITY - ST - ZIP	New York, NY			-\$7-ZIP				빖
TITLE	ρ	DELETE	2.1 TITU			☐ Change	Addition	뚱
NAME	Rubustur, Joesph		2.2 NAM	ſ				
STREET ADDRESS	247 W. MK'89 " ST		2.3 STRE	ET ADDRESS				
CITY - ST - ZIP	NEW YORK INY		2. 4 CITY	-ST-ZIP				
TUTLE	V	☐ DELETE	31 TITLE			Change	Addition	
NAME	Douglas Pose		32 NAM	E				
STREET ADDRESS	Douglas Roser 2233 S. Kirkman A	Lj#83	3.3 STRE	ET ADDRESS				
CHTY-ST-71F	OCIANED EI 32811	Florier		(-ST-ZIP		TTo	4 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1
TITLE		☐ DELETE	4.1 TITLE			L_1 Change	L. Addition	
NAME			4. 2 NAN					
STREET ADDRESS			ſ	ET ADDRESS		۱۸		1
CITY+S1+7:P Title	***************************************	DELETE	5.1 TITLE	- ST- ZIP		C thinge	Addition	1
NAME			5.2 NAM				TL	
STREET ADDRESS			- 1	ET ADDRESS		4/1	4122/1	1
CHY ST-71P			5.4 CITY			YI J	Mag L	
TITLE		DELETE	6.1 TITLE		40000219	3043 hange	Addition	1
NAME			6.2 NAM	e	400002153043 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
STREET ADDRESS			63 STRE	ET ADDRESS	***165 . 00			
CITY-ST ZIP			6.4 CITY					
14. I do herel	by certify that the information supplied to indicated on this annual report or	ed with this filing does not qui	alify for the e	xemption stated	d in Section 119.07(3)(i), Florida Statuti 1 my signature shall have the same leg	s. I further certify that all effect as if made up	t the	
Lam an o		r the receiver or trustee empo	owered to ex-		rt as required by Chapter 607, Florida			1

Douglas Rose