

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2008 08:00 A
Secretary of State

DOCUMENT # P95000010528

1. Entity Name
VICTORIA I. PRISTO REAL ESTATE CORP.



Principal Place of Business
**2132 E. OAKLAND PARK BLVD
SUITE 201
FORT LAUDERDALE, FL 33306**

Mailing Address
**2132 E. OAKLAND PARK BLVD
SUITE 201
FORT LAUDERDALE, FL 33306**



04072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0563027

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PRISTO, VICTORIA I
2132 E. OAKLAND PARK BLVD, SUITE 201
FORT LAUDERDALE, FL 33306**

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000920924

05/14/08-80064-002 811.25

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **PRISTO, VICTORIA I**
STREET ADDRESS **2132 E. OAKLAND PARK BLVD, SUITE 201**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33306**

TITLE
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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 answered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Signature] **Director** 4/16/08 954 868
7658