

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

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Mar 31 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000017874 (5)

1. Corporation Name
PRESTIGE SHIPPING, INC.



Principal Place of Business
8284 N.W. 66TH STREET
MIAMI FL 33166

Mailing Address
8284 N.W. 66TH STREET
MIAMI FL 33166-2720

3. Date Incorporated or Qualified 03/06/1995	3a. Date of Last Report 03/25/1996
4. FEI Number 65-0561095	☒ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business
21 7270 N.W. 12th Street
Suite, Apt. #, etc.
22 #381
City & State
23 Miami FL
Zip
24 33126

2a. Mailing Address
26 7270 N.W. 12th Street
Suite, Apt. #, etc.
27 #381
City & State
28 Miami FL
Zip
29 33126

9. Name and Address of Current Registered Agent
CASTERA, ARNOLD
8284 N.W. 66TH STREET
MIAMI FL 33166

10. Name and Address of New Registered Agent
81 Name CASTERA, ARNOLD
82 Street Address (P.O. Box Number is Not Acceptable)
7270 N.W. 12th Street Suite #381
83
84 City Miami FL 85 Zip Code 33126

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and assume with me and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE 3-11-97
(601) Registered Agent; signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PD	☐ DELETE	1.1 TITLE BELIARD, PATRICK (PD)	☒ Change ☐ Addition
1.2 NAME BELIARD, PATRICK		1.2 NAME 7270 N.W. 12th Street Suite #381	
1.3 STREET ADDRESS 8284 N.W. 66TH ST.		1.3 STREET ADDRESS Miami FL 33126	
1.4 CITY - ST - ZIP MIAMI FL 33166		1.4 CITY - ST - ZIP MIAMI FL 33126	
2.1 TITLE SV	☐ DELETE	2.1 TITLE CASTERA, ARNOLD SV	☒ Change ☐ Addition
2.2 NAME CASTERA, ARNOLD		2.2 NAME 7270 N.W. 12th Street Suite #381	
2.3 STREET ADDRESS 8284 N.W. 66TH ST.		2.3 STREET ADDRESS MIAMI FL 33126	
2.4 CITY - ST - ZIP MIAMI FL 33166		2.4 CITY - ST - ZIP MIAMI FL 33126	
3.1 TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
3.2 NAME		3.2 NAME	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP		3.4 CITY - ST - ZIP	
4.1 TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP		4.4 CITY - ST - ZIP	
5.1 TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP		5.4 CITY - ST - ZIP	
6.1 TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I, the undersigned, certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE: _____
DATE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-97 (305) 639-3460

CR2E034 (9/96)