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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000044772 (8)

PRISM PREFERRED PRODUCTS, INC.

FILED Feb 04 1998 8:00am Secretary of State

1,110.	THE CHIED THOUGHT,	,,,,,,							
Principal Plac	e of Business	Mailing Address		7	-				
· ·									
126 QUAILWOOD DRIVE PO BOX 1224 WINTER HAVEN FL 33890 AUBURNDALE FL 33832					Í	DO 1155 1170			
					<u> </u>		ITE IN THIS S	PACE	
						Date Incorporated or Qualifie	a		j
2 Principal P	Place of Business	2a. Mailing Address				06/02/1995 El Number		Tár	plied For
21						59-3321279			ot Applicable
Suite, Apt.	Suite, Apt. #, etc.						\$8.75	<u>-</u> -	
22	27				5. C	Certificate of Status Desired		Fee Re	
City & Stat	e	City & State	City & State			lection Campaign Financing		\$5.00	May Be
28						rust Fund Contribution		Added t	
Zip	Country Zip		Country		_	his corporation owes or has	•	- -	1
24	25		30			ersonal Property Tax due Ju			No
	g. Name and Address of Curre	nt negistered Agent	81	Name	10. 1	lame and Address of New	negistered A	gent	
	HNSON, LORI J		°'	1 /	ori .T.	Johnson			
	O QUAILWOOD DRIVE	82	Street	Address (2.0	D. Box Number is Not Accept 6u (1) Oak'S	table	7		
~ *****	YTER HAVEN FL 93880	83		<u> </u>	oury vars	BIVA			
		03	Hu	courn	dale		.3		
			84	City			FL	85 Zing	792
44 Durement	to the provisions of Sections 607.050	02 and 607 1508. Florida Statutor	e the abov	named .	corporation	cultimite this statement for th		changing it	c registered
office or r	egistered agent, or both, in the State	e of Florida. Such change was au	uthorized b	y the corp	poration's bo	ard of directors. I hereby acc	cept the appo	intment as	registered
•	m familiar with, and accept the oblig	iations of, Section 607.0505, Flori	ida Statute	S.					į
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE:	Registered Ag	ent signature	required when re	instaling)	DATE		
12.		ID DIRECTORS	13.			DITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	IS IN 12
TITLE	PD	DELETE	1.1 TITLE					Change	Addition
NAME	JOHNSON, ROBERT		1.2 NAME		Ì				1
STREET ADORESS	126 QUAILWOOD DRIVE		1.3 STREET ADDRESS		ŀ				ļ
CITY-ST-ZIP	WINTER HAVEN FL 33880		1.4 CITY-	ST-ZIP					
TITLE	VD	DELETE	2.1 TITLE					Change	Addition (
NAME	JOHNSON, WILLIAM		2.2 NAME		م.م.	1 hera tak	x Blv.	1.	
_STREET_ADDRESS	909 VAN DRIVE		2.3 STREE	FADDRESS .	1503	pubally yar		., , , ,	2
CITY-ST-ZIP	AUBURNDALE FL		2. 4 CITY-	ST-ZIP	HUE	rundale,	<u> </u>	200	3
TITLE	SD	☐ DELETE	3.1 TITLE	Ţ	ļ	, ,	أدما	Lipange	Addition
NAME	JOHNSON, LORI J		3.2 NAME		1503	Auburn Oak	5 6/16	A	ļ
STREET ADDRESS	120 QUAILWOOD DRIVE			ADDRESS	12.6	Auburg Oak Murndale, i Auburn Oak Murndale, Fr	, 23	823	ľ
CITY-ST-ZIP	WINTER HAVEN FL 33880	DELETE	3.4. CITY-	S1-ZIP	MUL	urnage r		☐ Change	Addition
TITLE NAME		ריז מנוכונ	4.1 TITLE 4.2 NAME	1			l	— Anguige	LT AQUIDON
			ŧ	Annaree					
STREET ADDRESS CITY+ST-ZIP			4	ADDRESS					
TITLE		DELETE	4.4 CITY-S 5.1 TITLE	N-ZIT			<u>-</u>	Change	Addition
NAME			5.2 NAME			•	·		
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY-S						
TITLE		DELETE	6.1 THILF	71.511			T	Change	Addition
NAME		- "	6.2 NAME				•	'	_
STREET ADDRESS			6.3 STREET	ADDRESS					.}
CITY-ST-ZIP			6.4 CITY - S	- 1					1
	ertify that the information supplied w	vith this filing does not qualify for			ed in Section	119.07(3)(i). Florida Statutes	. I further cer	ify that the	Information

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 vustue empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with address.

CICHATURE TON ON DONN ON

1-30-98

941-967-9421