~2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000068860 1. Entity Name PRESTIGE CONSULTANTS OF BREVARD, INC. Principal Place of Business Mailing Address 115 HICKORY STREET, SUITE 103 115 HICKORY STREET, SUITE 103 MELBOURNE, FL 32904 MELBOURNE, FL 32904

FILED Apr 23, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE



4.	FEI Number			Applied For
	59-3450009		[Not Applicable
5.	Certificate of Status D	esired		5 Additional equired

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

ANDREWS, TIM 115 HICKORY STREET, SUITE 103 MELBOURNE, FL 32904

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

04192008

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								
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREWS, TIM 115 HICKORY # 103 MELBOURNE, FL 32904							
TITLE NAME STREET ADDRESS CITY-ST-ZIP					03/12/00-00013-001 130.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS ; CITY-ST-ZIP				IN .	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,			:			
12. I hereby certify that the information supplied with this filling 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								