

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90094 022 ***150.00

DOCUMENT # P95000077879

1. Corporation Name
PRIME PUBLIC RELATIONS CONSULTANTS INC.



Principal Place of Business
19685 N.W. 62ND COURT
MIAMI FL 33015

Mailing Address
19685 N.W. 62ND COURT
MIAMI FL 33015

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/11/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0612047

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CASTILLO, JAIME E
19685 N.W. 62ND COURT
MIAMI FL 33015

81 Name IVETTE MEDINA-CASTILLO
82 Street Address (P.O. Box Number is Not Acceptable)
19685 N.W. 62nd Court
83
84 City Miami, FL 85 Zip Code 33015

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Ivette M. Castillo President/Director 4/27/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME CASTILLO, JAIME E
STREET ADDRESS 19685 N.W. 62ND COURT
CITY-ST-ZIP MIAMI FL 33015

1.1 TITLE PRESIDENT / DIRECTOR / TREASURER ☒ Change ☐ Addition
1.2 NAME IVETTE MEDINA-CASTILLO
1.3 STREET ADDRESS 19685 N.W. 62nd Court
1.4 CITY-ST-ZIP MIAMI, FL 33015

TITLE VM ☒ DELETE
NAME CASTILLO, IVETTE
STREET ADDRESS 19685 NW 62ND COURT
CITY-ST-ZIP MIAMI FL

2.1 TITLE JAIME E CASTILLO ☒ Change ☐ Addition
2.2 NAME 19685 N.W. 62nd Court
2.3 STREET ADDRESS MIAMI, FL. 33015 (VICE-PRESIDENT)
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE GILMA RODRIGUEZ ☐ Change ☒ Addition
3.2 NAME 19685 N.W. 62nd Court
3.3 STREET ADDRESS MIAMI, FL. 33015 (SECRETARY)
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ivette M. Castillo IVETTE CASTILLO 4/27/99 (305) 620-0494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0132951

CR2E034 (11/98)