3-5-98 B-2871 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000017651 (6)

PRESTIGE INVESTMENT PROPERTIES, INC.

	THOSE HAVEOTHER THOSE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Principal Place of Business Mailing Address					4 SENTORI SIR SENT BENT BENT BENT BEST BENT BENT TEEN BY		
165 ANNWOOD RD PALM HARBOR FL 34685		165 ANNWOOD RD PALM HARBOR FL 34685 US	PALM HARBOR FL 34685		DO NOT WRITE IN THIS SPACE		
					Date Incorporated or Qualified 02/26/1996		
2. Principal Place of Business 2a. Mailing Address						pplied For	
21 26		26	28		65-0642267	lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Additional Required	
City & State City & State		City & State			6. Election Campaign Financing \$5.00	May Be	
23						to Fees	
Zip	}		Country	y	This corporation owes or has paid the current year In Personal Property Tax due June 30. Yes	ntangible No	
24	25 29 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent			
N	OBLES, WILLIAM R		81	Name			
165 ANNWOOD RD PALM HARBOR FL 34665			82	Street /	Address (P.O. Box Number is Not Acceptable)		
PALM MARBOR FL 34885			83				
			84	City	FL 85 Zip	Code	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above						its registered	
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 Signature, typed or printed name of registered agent and liftle if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
TITLE	P DELETE		1.1 TITLE		L] Change	Addition :	
NAME OXDEST ADORSES	NOBLES, WILLIAM R 165 ANNWOOD RD		1.2 NAME				
STREET ADDRESS CITY-ST-ZIP	PALM HARBOR FL		1.3 STREET ADDRESS 1.4 City-St-Zip				
TITLE	DELETE		2.1 TITLE		☐ Change	Addition	
NAME			2.2 NAME				
STREET ADDRESS	s t		2.3 STREET	ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE	DELETE		3.1 TITLE		☐ Change	Addition	
NAME			3.2 NAME				
STREET ADORESS	⁵		3.3 STREET				
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	3.4. CITY 4.1 TITLE	ST-ZIP	Change	Addition	
NAME		em Decere	4.2 NAME	1	_ one ign		
STREET ADDRESS	<u>.</u>		4.3 STREET			j	
CITY-ST-ZIP			4.4 CffY-S				
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME			5.2 NAME	j		ľ	
STREET ADDRESS			5.3 STREET	ADDRESS	4.3		
CITY-ST-ZIP	<u> </u>		5.4 CITY - S	T-ZIP		4 4 4 10 1	
TITLE	1	DELETE	6.1 TITLE	ļ	Change	Addition	

6.3 STREET ADDRESS

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 of 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 an attackment with an address.