

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

FILED

00 MAY 19 AM 11:18
05-04-1999 90162 037 ***150.00

PROMPT CORPORATION ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---

DOCUMENT # P97000019178

1. Corporation Name
PRICE WISE INVESTMENTS, INC.

Principal Place of Business 4251 NE 27TH AVENUE LIGHTHOUSE POINT FL 33064	Mailing Address 4251 NE 27TH AVENUE LIGHTHOUSE POINT FL 33064
---	---

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/28/1997	
4. FEI Number APPLIED FOR 40-0000000	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	
7. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country 28
---	--

9. Name and Address of Current Registered Agent
**CERRITO, JOAN R
4251 NE 27TH AVENUE
LIGHTHOUSE POINT FL 33064**

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1606, 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
☐ DELETE		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CERRITO, EDWARD J 4251 NE 27TH AVENUE LIGHTHOUSE POINT FL 33064	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CERRITO, PHILIP E 218 NE 14TH AVENUE POMPANO BEACH FL 33060	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	DV. CERRITO - PHILIP E. 566 SE 13 AVE DEERFIELD BEACH FL 33441 (Change)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST. CERRITO, JOAN R 4251 NE 27TH AVENUE LIGHTHOUSE POINT FL 33064	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE 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: *Edward J. Cerrito* **SIGNATURE REQUIRED** 4/27/99 (951) 942-3398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)