2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DESECTOR

Jul 17, 2008 8:00 am Secretary of State **DOCUMENT # P97000019659** 07-17-2008 90063 008 ***150.00 PRESTIGE MANAGEMENT GROUP, INC. Principal Place of Business Mailing Address 401113~3 3915 LEE BLVD 3915 LEE BLVD LEHIGH ACRES, FL 33971 LEHIGH ACRES, FL 33971 US No Chg-P CR2E034 (11/05) 04092008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0749551 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent MAROTI, EDWARD L SR DO NOT WRITE 21620 N RIVER ROAD ALVA, FL 33920 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MAROTI, EDWARD L SR NAME 21620 N RIVER ROAD STREET ADDRESS CITY-ST-ZIP ALVA, FL: 33920. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied with the information of the corporation or the receiver or hyster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED