

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000032955

1. Entity Name

PRESTIGE PROVIDERS SERVICES, INC

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90106 030 ***158.75

Principal Place of Business

20031 N.W. 63RD COURT
MIAMI FL 33015

Mailing Address

5901 N.W. 151ST 105B
MIAMI FL 33014-2428

2. Principal Place of Business

5901 NW 151 St.

3. Mailing Address

5901 N.W. 151 St.

Suite, Apt. #, etc.

105B

Suite, Apt. #, etc.

105B

City & State

Miami, FL

City & State

Miami, FL

Zip

33014

Country

USA

Zip

33014

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0743685

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIAZ, NATIVIDAD

20031 N.W. 63RD COURT
MIAMI FL 33015

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Natividad Diaz Natividad Diaz President 01/04/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	DIAZ, N	
STREET ADDRESS	20031 NW 63 CT	
CITY-ST-ZIP	MIAMI FL 33015	
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Natividad Diaz Natividad Diaz - President 01/04/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)