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

PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** **Secretary of State** 03-22-1999 90018 024 ***150.00

FILED Mar 22, 1999 8:00 am

1999

DOCUMENT # P9700055410 1. Corporation Name

PRESTIGE CONSTRUCTION OF SOUTH FLORIDA, INC.

Mailing Address Principal Place of Business 4398 NW 31ST AVE. 4398 NW 31ST AVE. OAKLAND PARK FL 33309 OAKLAND PARK FL 33309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/23/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 65-0766206 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Г Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Zip Country Zip Country This corporation owes the current year Intangible \square No 30 Personal Property Tax. 25 29 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SPADAVECCHIA, JOHN JR. Street Address (P.O. Box Number is Not Acceptable) 82 4398 NW 31ST AVE. OAKLAND PARK FL 33309 83 85 Zip Code 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CR2E034.(11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Change ☐ Addition ☐ DELETE 1.1 TITLE TITLE 1.2 NAME SPADAVECCHIA, JOHN JR. NAME 1.3 STREET ADDRESS STREET ADDRESS 4398 NW 31ST AVE. **OAKLAND PARK FL 33309** 1.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ DELETE 21 TITLE Change TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

polied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information lements 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 the reference trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an attachment with an address, with all other like empowered. 14. I hereby certify that the information indicated on this annual report a officer or director of the corpora Block 12 or Block 13 if change

6.4 CITY-ST-ZIP

SIGNATURE

CITY ST ZIP'

植生 (1) 12 27