

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

1999 DIVISION OF CORPORATIONS
DOCUMENT # P9700085782

THE STATE OF STATE

99 AUG 12 PM 12: 08

PRESTIGE PROPERTIES GROUP, INC.						
						A NGCHĀĐA TIÐ YÐIRI HÐUR ÐÐUR ÐÐUR ÐÐUR ÐÐUR LÐRAF ÐRUR HÐUR HÐUR HÐUR HÐUR HÐUR HÐUR HÐUR
Principal Plac		Mailing Address				
3511 RIVIERA DR 3511 RIVIERA DR CORAL GABLES FL 33134 CORAL GABLES FL 33134						05-13-49 90041 035 \$150.00
US US						DO NOT WRITE IN THIS SPACE
İ						3. Date Incorporated or Qualified
						10/03/1997
	lace of Business	2a. Mailing Address	├ ┐			4. FEI Number Applied For
21		26	 			65-0792255 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
27			a			Fee Required
23	.6	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country			8. This corporation owes the current year
24	25	29	H	30		Intangible Personal Property. Yes No
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered Agent
DAD	NOO IOINI			81	Name	
	RIOS, JOHN		ŧ	82	Street	Address (P.O. Box Number is Not Acceptable)
3511 RIVIERA DR CORAL GABLES FL 33134						
j con	AL GABLES PL 33134		ļ	83		
			ŀ	84	City	85 Zip Code
						FL S E S
11. Pursuan	t to the provisions of sections 607.0	502 and 607.1508, Florida Statute of Florida, Such change was	es, the abo	ove-r	named c	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	~					
12.	Signature, typed or printed name of registered	AND DIRECTORS	OTE Register	ed Ag	eni signati.	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	11 T(T)	LE.		1
NAME	BARRIOS, JOHN M			ME		Gladys Borrios 3511 Riviera Dr
STREET ADDRESS	AAA A A WAARAA A ARAA A AAAA AAAA AAAA		1.3 STR	EET A	ODRESS	3511' Riviera Dr
CITY-ST-ZIP	MIAMI FL 33135		1.4 CIT	1.4 CITY-ST-2		Coral Gobles, Fl 33134
TITLE	D	DELETE	2 1 TITL	21 TITLE		Change Addition
NAME	DEGOTI, JOSE JR.		2 2 NA	2 2 NAME		
STREET ADDRESS	1665 S.W. 9TH STREET		2 3 STR	23 STREET AD		
CITY-ST-ZIP	MIAMI FL 33135			2.4 CITY-ST-2		
TITLE		DELETE		3 1 TITLE		Change Addition
NAME			3 2 NAA			
STREET ADDRESS				3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-		2#P	
TITLE		L DELETE	4.1 TITL			Change L_ Addition
NAME NAME			4.2 NAA		BBBCcc	
STREET ADDRESS					DDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CiT1		: HP"	Channe Laure
NAME		L DELETE	- 1	52 NAME		Change L Addition
STREET ADDRESS	I I		- F	STREET ADDRESS		
CITY-ST-ZIP				5.4 CITY-ST-ZIF		18/10
TITLE		DELETE	6.1 TITL			Change Addition
NAME			6.2 NAW	ΑE		5.00.90
STREET ADDRESS			63 STREET AL		DDRESS .	
CITY-ST-ZIP				Y-ST-Z	(IP	
						n section 119.07(3)(i), Florida Statutes. I further certify that the information ature shall have the same legal effect as if made under oath; that I am

1. 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 phanged, or on an attachment with an address.

SIGNATURE:

2/4/49

(20.00)