

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 29, 1999 8:00 am  
Secretary of State

04-29-1999 90248 042 \*\*\*150.00

0293445

DOCUMENT # P98000064613

1. Corporation Name

PRUDENTIAL PROPERTIES & INVESTMENTS, INC.

Principal Place of Business

6299 WEST SUNRISE BLVD., STE. 201  
SUNRISE FL 33313

Mailing Address

6299 WEST SUNRISE BLVD., STE. 201  
SUNRISE FL 33313

2. Principal Place of Business

21 5617 NW 21<sup>ST</sup> ST.

2a. Mailing Address

26 5617 NW 21<sup>ST</sup> ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 LAUDER HILL, FL

City & State

28 LAUDER HILL FL

Zip

24 33313 25 USA

Zip

29 33313 30 USA

9. Name and Address of Current Registered Agent

GORDON, ERROL  
6299 WEST SUNRISE BLVD., STE. 201  
SUNRISE FL 33313

3. Date Incorporated or Qualified

07/20/1998

4. FEI Number

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

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

ERROL GORDON

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

3161 NW 47<sup>th</sup> Ter, #101

83

84 City

LAUDERDALE LAKES FL

85 Zip Code

33319

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

ERROL GORDON

ERROL GORDON

4/14/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

PD

☐ DELETE

NAME

GORDON, ERROL

STREET ADDRESS

6299 W. SUNRISE BLVD., SUITE 201

CITY-ST-ZIP

SUNRISE FL 33313

TITLE

VPD

☐ DELETE

NAME

MORGAN, RONALD

STREET ADDRESS

3571 N.W. 34TH TERRACE

CITY-ST-ZIP

FT. LAUDERDALE FL 33309

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/14/99

954 714 8587

CR2E034 (11/98)