

# **2002 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT# P98000106188

**FILED**  
**Apr 01, 2002 8:00 AM**  
**Secretary of State**

**Entity Name:** PRESTIGE PST CORP.

**Current Principal Place of Business:**

5104 N. ORANGE BLOSSOM TRAIL STE. 123  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

5104 N. ORANGE BLOSSOM TRAIL STE. 123  
ORLANDO, FL 32810

**New Mailing Address:**

**FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HARDEN, LANICE S  
2408 STRICKER DR.  
OCOEE, FL 34761 US

**Name and Address of New Registered Agent:**

HARDEN, LANICE S  
513 WATERWAY CT.  
OCOEE, FL 34761 US

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: LANICE HARDEN

04/01/2002

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Electronic Signature of Registered Agent

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Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ROBBINS, DEBBIE  
Address: 5681 WESTVIEW DR.  
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change ( ) Addition  
Name: ROBBINS, DEBBIE  
Address: 1018 AUTUMN LEAF DR.  
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Delete  
Name: ROBBINS, RICK  
Address: 5681 WESTVIEW DR.  
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change ( ) Addition  
Name: ROBBINS, RICK  
Address: 1018 AUTUMN LEAF DR.  
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Delete  
Name: HARDEN, LANICE  
Address: 5104 N. ORANGE BLOSSOM TRAIL STE. 123  
City-St-Zip: ORLANDO, FL 32810

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: HARDEN, TOM  
Address: 5104 N. ORANGE BLOSSOM TRAIL STE. 123  
City-St-Zip: ORLANDO, FL 32810

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICK ROBBINS

VP

04/01/2002

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Electronic Signature of Signing Officer or Director

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Date