## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P98000106188

Entity Name: PRESTIGE PST CORP.

Apr 01, 2002 8:00 AM Secretary of State

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

Current Mailing Address: New Mailing Address:

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

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

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

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

Electronic Signature of Registered Agent 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
 Title:
 D
 (X) Change ( ) Addition

 Name:
 ROBBINS, DEBBIE
 Name:
 ROBBINS, DEBBIE

 Address:
 5681 WESTVIEW DR.
 Address:
 1018 AUTUMN LEAF DR.

City-St-Zip: ORLANDO, FL 32810 City-St-Zip: WINTER GARDEN, FL 34787

Title: Title: () Delete (X) Change ( ) Addition ROBBINS, RICK Name: Name: ROBBINS, RICK 5681 WESTVIEW DR. 1018 AUTUMN LEAF DR. Address: Address: ORLANDO, FL 32810 WINTER GARDEN, FL 34787 City-St-Zip: City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HARDEN, LANICE
 Name:

 Address:
 5104 N. ORANGE BLOSSOM TRAIL STE. 123
 Address:

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HARDEN, TOM
 Name:

 Address:
 5104 N. ORANGE BLOSSOM TRAIL STE. 123
 Address:

 City-St-Zip:
 ORLANDO, FL 32810
 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