

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000023115

1. Entity Name

PRESTIGE DESIGNS.COM, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90084 024 ***150.00

Principal Place of Business

Mailing Address

178 LORELANE PLACE
KEY LARGO FL 33037

P.O. BOX 2664
KEY LARGO FL 33037-7664

2. Principal Place of Business

5443 Harborside Dr.

3. Mailing Address

5443 Harborside Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

4. FEI Number

65-0901625

Applied For

Not Applicable

Zip

33615

Country

Zip

33615

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CIANCIULLI, MARK A
178 LORELANE PLACE
KEY LARGO FL 33037

7. Name and Address of New Registered Agent

Name

Cianciulli, Mark A

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

5443 Harborside Dr.

City

Tampa

FL

Zip Code

33615

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS CIANCIULLI, MARK
CITY-ST-ZIP 178 LORELANE PLACE
KEY LARGO FL 33037

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☒ Addition
NAME P/D
STREET ADDRESS MARK CIANCIULLI
CITY-ST-ZIP 5443 Harborside Dr.
Tampa, FL - 33615

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS HOLLY EVANS
CITY-ST-ZIP 5443 Harborside Dr.
Tampa - FL - 33615

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MARK CIANCIULLI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-3-00

Date

813-925-0852

Daytime Phone #

CR26014 (9/97)