

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000067090

1. Entity Name

PRESTIGE DEVELOPMENT & REALTY GROUP, INC.

**FILED**  
May 01, 2000 8:00 am  
Secretary of State

05-01-2000 90453 045 \*\*\*150.00

Principal Place of Business

Mailing Address

2335 TAMiami TRAIL NORTH SUITE 301  
NAPLES FL 34103

2335 TAMiami TRAIL NORTH SUITE 301  
NAPLES FL 34103-4457

2. Principal Place of Business

1100 COMMERCIAL BLVD

3. Mailing Address

260 MONTEREY DR

Suite, Apt. #, etc.

112

Suite, Apt. #, etc.

SUITE 112

City & State

NAPLES, FL

City & State

NAPLES, FL

4. FEI Number

59-3593235

Applied For

Not Applicable

Zip

34104

Country

COHIER

Zip

34119

Country

COHIER

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GOLD, DENNIS S ESQ.  
2335 TAMiami TRAIL NORTH SUITE 301  
NAPLES FL 34103

7. Name and Address of New Registered Agent

Name

SAM GOODMAN

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

260 MONTEREY DR

City

NAPLES

FL

Zip Code

34119

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 Sam Goodman SAM GOODMAN 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 D ☐ Delete  
NAME GOLD, DENNIS S  
STREET ADDRESS 2335 TAMiami TRAIL NORTH SUITE 301  
CITY-ST-ZIP NAPLES FL 34103

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☒ Change ☐ Addition  
NAME SAM GOODMAN  
STREET ADDRESS 260 MONTEREY DR  
CITY-ST-ZIP NAPLES, FL 34119

TITLE SEC. TREASURER ☐ Change ☐ Addition  
NAME SAM GOODMAN  
STREET ADDRESS 260 MONTEREY DR  
CITY-ST-ZIP NAPLES, FL 34119

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: Sam Goodman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00 941-352-1556

Date

Daytime Phone #

CR2E034 (9/99)