FILED

2002 UNIFORM BUSINESS REPORT (UBR)

changed or on an attachment

SIGNATURE:

Jun 03, 2002 8:00 am P99000107401 DOCUMENT # Secretary of State 1. Entity Name 06-03-2002 91 206 007 ***1 50 00 PRESTIGE GUNITE OF MELBOURNE, INC. Principal Place of Business Mailing Address 7228-C WESTPORT PLACE 7228-C WESTPORT PLACE W. PALM BEACH FL 33413 W. PALM BEACH FL 33413 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0965941 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MAHONEY, BRIAN Street Address (P.O. Box Number is Not Acceptable) 7228-C WESTPORT PLACE W. PALM BEACH FL 33413 City Zip Code 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition MAHONEY, BRIAN A NAME NAME 7228-C WESTPORT PLACE STREET ADDRESS STREET ADDRESS W. PALM BEACH FL 33413 CITY-ST-ZIP CITY-ST-ZIP TITLE PERESTABLA ☐ Addition TITLE ☐ Delete NAME **CORNELIUS, PATTIE-LEE** NAME Cornelius, Patti Lee STREET ADDRESS 7228-C WESTPORT PLACE STREET ADDRESS **WEST PALM BEACH FL 33413** CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE Steve Harter NAME NAME 7228 C Westport Place STREET ADDRESS STREET ADDRESS CITY-ST-ZIP klest Palm Beach, FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRES STREET ADDRESS CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREE ADDRESS STREET ADDRESS CITY-T-ZIP CITY-ST-ZIP led with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information sport 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 seemptives and that my name appears in Block 11 or Block 12 in 13. I hereby certify that the information supplied with indicated on this report or suppliemental poort is of the corporation or the receive