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**Feb 24 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # V20857

(1)

**1. Corporation Name
PRESTIGE FINANCIAL GROUP, INC.**



Principal Place of Business

**2310 NW 3RD AVE
POMPANO BEACH FL 33060
US**

Mailing Address

**2310 NW 3RD AVE
POMPANO BEACH FL 33060-4963
US**

3. Date Incorporated or Qualified

03/13/1992

3a. Date of Last Report

08/30/1996

2. Principal Place of Business

**21 287 E. Newport Center Dr
Suite, Apt. #, etc.**

22 203

City & State

23 Deerfield Beach, FL

Zip

24 33442

Country

25 Broward

2a. Mailing Address

**21 287 E. Newport Center Dr
Suite, Apt. #, etc.**

27 203

City & State

28 Deerfield Beach, FL

Zip

29 33442

Country

30 Broward

4. FEI Number

Dr 65-0318217

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

**JONES, DONALD S. JR.
2611 N.W. 43RD STREET
LIGHTHOUSE POINT FL 33064**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE **P**
NAME **JONES, DONALD S., JR.**
STREET ADDRESS **2811 N.E. 43RD STREET**
CITY - ST - ZIP **LIGHTHOUSE POINT FL 33064**

TITLE DELETE **S**
NAME **TILKIN, NANCY**
STREET ADDRESS **7541 LAUDEN DRIVE**
CITY - ST - ZIP **LAKE WORTH FL 33487**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Donald S. Jones Jr
SIGNATURE AND TYPE, OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald S. Jones Jr 2/14/97 954-429-3800

Date

Daytime Phone #

CR2E034 (9/96)