FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name V35909

(3)

PRESCOTT ENTERPRISES, INC.

FILED
May 14 1998 8:00am
Secretary of State

Principal Plac	e of Business	Mailing Address			BIT 8/8/1 0/8/1 \$16/1 0/0/1 0/0/1 0/0/1 100/
2033 WOOD STREET		2033 WOOD STREET			
SUITE 115		SUITE 115			
SARASOTA F	L 34237	SARASOTA FL 34237			E IN THIS SPACE
				3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address		05/08/1992 4. FEI Number	1-1-
21	idos or odolinos	26		65-0341475	Applied For Not Applicable
Sulte, Apt	#, etc.	Suite, Apt. #, etc.			¢0.75
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation owes or has p	
24	25 Name and Address of Curre	29 Penistered Agent	30	Personal Property Tax due June 10. Name and Address of New Re	
DD		ant neglatered Agent	81 Name	10. Name and Address of New H	egistered Agent
	ESCOTT, CHARLES J.				
2033 WOOD STREET SUITE 115			82 Street A	ddress (P.O. Box Number is Not Accepta	ble)
	RASOTA FL 34237		83		
50	100 IA 1 E 04207				
			84 City		FL 85 Zip Code
11. Pursuant i	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the above-named o	corporation submits this statement for the pration's board of directors. I hereby access	purpose of changing its registered
office or ri	egi ster ed agent, or both, in the Stat m fam iliar with, and accept the obli	e of Florida. Such change was gations of, Section 60 7 050 5. Fi	authorized by the corpororida Statules.	pration's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE					
	Signature, lyped or printed name of registered a		F Registered Agent signature re	eguired when reinstaling}	DATE
12.	OFFICERS AF	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	
TITLE NAME	PRESCOTT, CHARLES J.	L. DECEIE	1,1 TITLE		L Change L Addition
STREET ADDRESS	2033 WOOD ST #115		1.2 NAME		
CITY-ST-ZIP	SARASOTA FL		1.3 STREET ADDRESS		
TITLE	D	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	PRESCOTT, PATRICIA L.		2.2 NAME		
STREET ADDRESS	2033 WOOD ST #115		2.3 STREET ADDRESS		
CITY-ST-ZIP	S ARASOTA FL		2.4 CITY-S1-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP		Chores T 4400
NAME		☐ nerci¢	5.1 TITLE		Change Addition
STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		El 2000 Ba El vagitibit
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
dd thereby a		21 21 2 22	93 011 01-01		

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 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.