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 # V45677

(4)

PRESTIGE EXPORT, INC.

•

of Rusiness Mailing Address

FILED Feb 11 1998 8:00am Secretary of State



1054 437-6184

Principal Place of Business Mailing Address								
18136 SW 4TH CT. 18136 SW 4TH CT.								
PEMBROKE PINES FL 33029				PEMBROKE PINES FL \$3029				
								DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified 06/19/1992
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21				26				65-0343952 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22				27				Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
23				28				Trust Fund Contribution Added to Fees
Zip	}\	ountry	ļ	Zip Counti				This corporation owes or has paid the current year Intangible
24	25		29		30			Personal Property Tax due June 30. Yes No
		Address of Curren	it Hegist	ered Agent		81	Name	10. Name and Address of New Registered Agent
	ANELLO, PEDRO					"'	Name	He .
	136 SW 4 COUF		82 Street			Street A	et Address (P.O. Box Number is Not Acceptable)	
PE	MBROKE PINES	FL 33029						
						83		•
						84	City	85 Zip Code
							•	FL `
11. Pursuant	to the provisions of	Sections 607.050	2 and 60	7.1508, Florida Statu	tes, the a	bove	-named	od corporation submits this statement for the purpose of changing its registered or
agent. I a	ım familiar with, an	d accept the obliga	ations of,	Section 607.0505, F	lorida Sta	tutes	, ,	orporations poard or directors. Thereby accept the appointment as registered
SIGNATURE								
OIGHPT OTE	Signature, typed or prints	d name of registered age	nt and litte in	fapplicable. (NO	TE . Registare	d Age	n signature	ure required when reinstating) DATE
12.		OFFICERS ANI	D DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD			☐ DELETE	1.1 11	ITLE		☐ Change ☐ Addition
NAME	GIANELLO, P				12 N	AME	l	
STREET ADDRESS	18136 SW 4				1.3 5	TREET	address	s
CITY-ST-ZIP	PEMBROKE I	PINES FL			140	ITY-SI	r-ZIP	
TITLE	VD			☐ DELETE	2 1 T	ITLE		Change Addition
NAME	GIANELLO, R				22 N	AME		
STREET ADDRESS	18136 SW 4				2.3 \$	TREET	ADDRESS	3
CITY-ST-ZIP	PEMBROKE I	Pines fl			2.40	CITY-S	T-ZIP	
TITLE				DELETE	3.1 T)	TLE		☐ Change ☐ Addition
NAME					3.2 N	AME.	j	
STREET ADDRESS					3.3 S	TREET	ADDRESS	3
CITY-ST-ZIP					3.4. C	ITY-S	T-ZIP	
TITLE				DELETE	4.1 TI			☐ Change ☐ Addition
NAME					4. 2 N	AME .	.	
STREET ADDRESS							ADORESS	
CITY-ST-ZIP						ITY-ST		
TITLE	·			☐ DELETE	5.1 TI			Change Addition
NAME				•	5.2 N		j	
STREET ADDRESS							ADDRESS	3
CITY-ST-ZIP						ITY-ST	J	
TITLE				DELETE	6.1 Ti			Change Addition
NAME					6.2 N			
STREET ADDRESS					•		ADDRESS	
]
CITY-ST-ZiP	ertify that the infor	mation supplied wi	ith this fil	ing does not qualify t		T2-YT lame		Med in Section 119.07(3)(i). Florida Statutes. I further certify that the information

14. 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 suppliemental 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 combination 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 changled, or on an attachment with an address.

ATURE (Sca) (Stevello) Racia (riquello 02/05/98