~2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9700094111 Jul 18, 2000 8:00 am 1. Entity Name **Secretary of State** NORTH STAR VISIONS, INC. 07-18-2000 90011 039 ***150.00 Principal Place of Business Mailing Address 7108 FAIRWAY DRIVE. SUITE 100 7108 FAIRWAY DRIVE. SUITE 100 PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0792270 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ume wolske CONDOR. DEE DEE Street Address (P.O. Box Number is Not Acceptable) 7108 FAIRWAY DRIVE, SUITE 100 PALM BEACH GARDENS FL 33418 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 (NOTE: Registered Agent signature required when reinstatung FILE NOW!!! FEE IS \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 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 12. 11. PC hairman Change ■ Addition ☐ Delete TITI F TITLE Roy C. Hanlin, Ir HAMLIN, ROY C JR NAME NAME 208 Honey Sucke Dr. STREET ADDRESS 170 CELESTIAL WAY CT., S-2 STREET ADDRESS piter; FI 33458 CITY-ST-7/P JUNO BCH FL 33408 CITY-ST-ZIP Change ☐ Addition fresident Roy Charles III ☐ Delete TITLE TITLE HAMLIN, CHARLES R III NAME 5259 85th Ave. North 15259 85TH AVE. NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33418 Falm Bch Gardens. Fr Change Treasurer, VP Hamlin, Joyce Anne ☐ Addition Delete TITLE TITLE HAMLIN, JOYCE A -- -NAME NAMF -STREET ADDRESS 170 CELESTIAL WAY, CT S-2 STREET ADDRESS 208 Honey Suckleidt. CITY-ST-ZIP CITY-ST-7/P JUNO BCH FL 33408 Moiter 172 Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TIT! F NAME THAM STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 supplied ental 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:

6.25-1610



7108 Fairway Drive, Suite 100 • Palm Beach Gardens, FL 33418 (561) 625-1610 • Fax (561) 625-1611 • e-mail: nsvinc@aol.com

Memorandum

TO:

To Whom It May Concern

FROM:

Jamie Wolske

DATE:

July 10, 2000

SUBJECT: Uniform Business Report 2000

Upon speaking to an official in your office, I was advised to write this memo to regarding the Uniform Business Report for our company.

I am new to this position and the person responsible for filing this report left suddenly, without notice. We also never received the first notice for filing this report. I was told to send this letter with our reports to keep from having the late penalty assessed.

Please find attached with this memo the business report with changes and additions. Should you have any questions, please feel free to contact me at 561/625-1610.

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