# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 07, 2005 8:00 am
Secretary of State

01-18-2005 90028 013 ***150.00

DOCUMENT # P99000103736

1. Entity Name
ALLSTAR REAL ESTATE & MANAGEMENT, INC.

Principal Place of Business
2122 MARINER BLVD
SPRING HILL, FL 34609

Mailing Address
2122 MARINER BLVD
SPRING HILL, FL 34609

01112005 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3610540

Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

D'AGRELLA, PLACIDUS
12293 DEEP CREEK DRIVE
BROOKSVILLE, FL 34609

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | P |
| NAME | D'AGRELLA, PLACIDUS |
| STREET ADDRESS | 12293 DEEP CREEK DR |
| CITY-ST-ZIP | SPRING HILL, FL 34609 |
| TITLE | V |
| NAME | D'AGRELLA, PRAXEDIS |
| STREET ADDRESS | 12293 DEEP CREEK DR |
| CITY-ST-ZIP | SPRING HILL, FL 34609 |
| TITLE | |
| NAME | |
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| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Placidus D'Agrella President 2/5/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #