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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # S93164

(9)

GOLDSTAR MANAGEMENT COMPANY, INC.

FILED
Apr 18 1997 8:00am
Secretary of State

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Principal Plac	e of Business	Mailing Address			- I MADINATA NA DALAM SILAN INDIA BUNIN DIAN ANDI ANDIN ALAN, ENDIN DIAN, DIAN BUDIN 1041				
-SCO-WOOD DO		-600 WOOD DOVE AVENUE							
JARPON SPRI	NGS PL 54009	"TARPON SPRINGS FL 34689 US	TARPON SPRINGS FL 34689-7529						
-10	·	US			3 Date Incorporat	ad or Qualified	30 Date	ofloat	Donast
					3. Date Incorporated or Qualified 3a. Date of Last 04/08/1996				лероп
2. Principal P	lace of Business	2a. Mailing Address	010 11		4. FEI Number		0.,00	·	pplied For
21 340	72 US 19N	26 34072 42	S19 N		<u>59-3047072</u>	?		N	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			atus Desired		•	Additional
22 City & Stat		27 City & State							Required
23 PALH	HARbor FL	28 BOLD HAR	bor F		6. Election Campa Trust Fund Cont	•			May Be I to Fees
=====================================	RY CONDY AND MAIL	5 484 to	Coupy	1101	8. This corporation				s. 199.032,
24 2 (44	9. Name and Address of Current		10 VIDE		Florida Statutes 10. Name and Add		Yes		
GOI	LDMAN, WILLIAM		81 Nam	ne	ro. rame and rad	icas of New Hey	JISTOI GU AN	ioni.	
	WOOD DOVE AVENUE								
	PON SPRINGS FL 34689		82 Stree	et Addres	ss (P.O. Box Number	is Not Acceptab	e)		
17.11			83						
			24 00						
i			84 City				FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above-name	ed corpo	ration submits this sta	tement for the pi	roose of c	nanging	its registered
agent. I a	registered agent, or both, in the State of im tamilia, with, and accept the obligat	i Florida, Such change was au ions of, Section 607.0505, Flori	thorized by the c da Statutes.	orporatio	n's board of directors	. I hereby accep	t the appoir	ntment as	registered
SIGNATURE	Wucces To	cilier				4	DATE	95	
	Signature, typed or printed name of record of egent		Hegistered Agent signal	are required					
12.	OFFICER; AND	DIRECTORS	13.	1.6	ADDITIONS/CHAI	<u> </u>		<u> </u>	
TITLE	GOLDMAN, WILLIAM	☐ DELETE	1.1 TITLE	100	es Am)	Directo	XR. D	Change	☐ Addition
NAME STREET ADDRESS	300 WOOD DOVE AVENUE		1.2 NAME	_					
	TARPON SPRINGS FL		1.3 STREET ADDRES	S					
CITY-ST-ZIP TITLE	DST	DELETE	1.4 CHY-ST-ZIP 2.1 TRUE					Change	Addition
NAME	GOLDMAN, SHARON	L better	2 2 NAME	İ	•		L.	J Chlarige	Muddidin
STREET ADDRESS	300 WOOD DOVE AVENUE		23 STREET ADDRES						
CITY-ST-ZIP	TARPON SPRINGS FL		2 4 CiTY-ST-ZIP	'					
TITLE		DELETE	3.1 Title				Г	Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS	s					
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	5					
CITY-ST-ZIP			4.4 CHY-S1-7IP						
TUTE		☐ DELETE	5 1 111LE				L	Change	Addition
NAME		i	5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS	3					
CITY-ST-ZIP	<u> </u>	T ROLL PAR	5.4 CITY-ST-ZIP	ļ			-	1	
TITLE		∐ DELFTE	6.1 NTLE				L.	J Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS	5					
CITY-ST-ZIP	ov certify that the information supplied	with this filing does not qualify (6.4 CITY - \$1 - ZIP	glalad in	Section 119 07/93/6	Florida Statutos	1 further or	artify that	the
informatio	by certify that the aformation supplied on indicated on the annual report or sup ficer or director of the corporation or the n Block 12 or by kt 13 if changed, or c	oplemental annual report is truc	and accurate a	nd that m	y signature shall have	the same legal	effect as if	made un	der oath; that
appears is	n Block 12 or block 13 if changed, or o	ic receiver or trustee empowers in an altachment with an addre	eo to exécute this iss.	report a	is required by Chapte	er 607, Florida Sta 10 12	atutes; and Z	that my i	name
	//	Gil Queau	LETTE C. I.		سر ، بر ،	. E. 8/3	· ~ ~	<u>-</u> -	0.1