## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # 631486 Jan 19, 2000 8:00 am Secretary of State 1. Entity Name THREE STAR INVESTMENTS, INC. 01-19-2000 90183 033 \*\*\*150.00 Mailing Address Principal Place of Business 910 N.E. 8TH STREET 910 N.E. 8TH STREET HALLANDALE FL 33009-2627 HALLANDALE FL 33009 ប្រប្រភេទ 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2031665 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LUCAS, HENRICA Street Address (P.O. Box Number is Not Acceptable) 1937 JACKSON STREET APT. 201 **HOLLYWOOD FL 33020** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE **PSTD** Delete TITLE NAME NAME LUCAS, HENRICA STREET ADDRESS STREET ADDRESS 1937 JACKSON STREET APT. 201 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME LUCAS, PAUL RICHARD NAME STREET ADDRESS STREET ADDRESS 1937 JACKSON STREET CONDO 201 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME LUCAS, GEORGE JOSEPH NAME STREET ADDRESS STREET ADDRESS 1937 JACKSON ST.,#201 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Change Addition TITLE □ Delete TITLE ALEXANDER, CHRISTOPHER NAME NAME STREET ADDRESS STREET ADDRESS 1937 JACKSON STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 January 201