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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 638974

(6)

VICTORIA STAR INVESTMENTS, INC.

Principal Place of Business	Mailing Address
4691 S.W. 72ND AVENUE	4691 S.W. 72ND AVENUE
MIAMI FL 33155	Miami Fl 33155-4540

FILED Apr 07 1997 8:00am Secretary of State



4691 S.W. 72ND AVENUE 4		Mailing A	Mailing Address 4891 S.W. 72ND AVENUE MIAMI FL 33155-4540				1 198(19 E1195 11/41 (61/4 1911) 19411 21/41 21/41 21/41 21/41 21/41 21/41 21/41 21/41 21/41 21/41 21/41 21/41			
							 Date Incorporated or Qualified 10/03/1979 		e of Last F 8/1996	Report
2. Principal Pla	ice of Business	2a. Mailin	g Address	***************************************			4. FEI Number		A	pplied For
26							59-1962844	Not Applicable		
Suite, Apt. #	Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27	·_··				G, COMMODIO OF SIGNAS SCOTTS		Fee R	equired
City & State		City &	State				6. Election Campaign Financing	!1		May Be
23	Charte	28		Cou	mta.		Trust Fund Contribution	<u> </u>	• • • • • • • • • • • • • • • • • • • •	to Fees
Ζφ	Country	Zip		├ ─┐	irary		8. This corporation has liability for i	ntangible l] Yes = []		i. 199.032,
24	25 Same and Address of Cur	29 rent Registered A	Anent	30	г—		10. Name and Address of New Re			
9119	SMAN, LEONARD P.A.			****	81	Name				
	S.W. 72 AVENUE			\	-	6	000000000000000000000000000000000000000	1-1		
	II FL 33155				82	Street Add	dress (P.O. Box Number is Not Acceptab	10)		
TAILCHAIL	11 1 00 00				83					
				Į			·····		., 	
					64	City		FL	85 Zip	Code
11. Pursuant to	the provisions of Sections 607.0	0502 and 607.150	8. Florida Statu	ites, the at	bove-	named cor	poration submits this statement for the p	urpose of	changing i	its registered
office or re	gistered agent, or both, in the St n familiar with, and accept the ob	ate of Florida Suc	chichange was	authorized	d by i	the corpora	ation's board of directors. I hereby accept	it the appo	eintment as	registered
	maniliar with, and accept the or	ingations of, becti	on 007,0000, 1	lorida ştat	iuies.					
SIGNATURE	Sign thing typed or pented name of registered	agent and title if applica	iblu. (NC	OTE: Registered	d Agen	l per stulbogia f	ilred when reinstaling)	DATE		
12.	OFFICERS.	AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTO	RS IN 12
TITLE	PSD		DELETE	1.1 111	TLE				Change '	Addition
NAME	SEMPLE, WILLIAM M.S.			1.2 NA	AME					
STREET ADORESS	4891 S.W. 72 AVE			1.3 \$1	TREET A	DORESS				
CITY-ST ZIF	MIAMI FL 33155			1.4 CI	TY-ST	- ZIP				
THUE			DELETE	21 JI	TLE				Change	Addition
NAME				2.2 N/	AME					
STREET ADDRESS				2.3 S1	TREET A	ODRESS				
C-TY-ST-ZIP				2. 4 C	ITY-ST	- ZIP		·	-	
THTLE			DELETE	3.1 10	TLE	Į.		٠.,	Change	Addition
NAME				3.2 N/	AME		r in			
STREET ADDRESS				3.3 S1	TREET A	DORESS				
CITY - ST - ZIP					ITY-ST	-ZIP			<u> —</u>	
TUTAE			☐ DELETE	4.1 TI		1			L Change	Addition
NAME				4.2 N						
STREET AODRESS				43 ST	TREET A	ADDRESS				
City-St-ZiP					TY-ST	-ZIP				
TaTLE			☐ DELETE	5.1 TI					L Change	☐ Addition
NAME				5.2 N						
STREET ADORESS						IDDRESS				
CHY-S1 ZIF			No. 222		ITY-ST	- ZIP				
TITLE			DELETE	6.1 70					Change	Addition
NAME				6.2 N/		į				
STREET ADDRESS				6.3 ST	TREET A	ADDRESS				
CHY-ST-ZIP	10 (2004) No. 12 (10 10 10 10 10 10 10 10 10 10 10 10 10 1			64 C	ITY-ST	- ZIP	d in Castian 410 07/07/07 Elecido Cratato			

I do 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 annual report or supplemental 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 corporation or the receiver or trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed,

SIGNATURE