

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 651236 (2)

1. Corporation Name

GOLD STAR, INC.



Principal Place of Business

725 NE 125TH STREET
SUITE 200
N MIAMI FL 33161

Mailing Address

725 NE 125TH STREET
SUITE 200
N MIAMI FL 33161

2. Principal Place of Business

2a. Mailing Address

21 701 LINCOLN ROAD

26 701 LINCOLN ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 103

27 SUITE 103

City & State

City & State

23 MIAMI BEACH, FLORIDA

28 MIAMI BEACH, FLORIDA

Zip

Country

Zip

Country

24 33139

25 U.S.A.

29 33139

30 U.S.A.

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
11/07/1979

3a. Date of Last Report
06/07/1995

4. FEI Number

59-1951764

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

SCHULTZ, ARTHUR JAY
725 NE 125TH
SUITE 200
NORTH MIAMI FL 33161

81 Name

SCHULTZ, ARTHUR J.

82 Street Address (P.O. Box Number is Not Acceptable)

701 LINCOLN ROAD

83

SUITE 103

84 City

MIAMI BEACH

FL

85 Zip Code

33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE: ARTHUR J. SCHULTZ (PRESIDENT) DATE: APRIL 22, 1996

Signature typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE VPST ☒ DELETE
NAME SCHULTZ, ROCHELLE
STREET ADDRESS 384 CAMERON DR
CITY-ST-ZIP FT LAUDERDALE FL

TITLE PD ☒ DELETE
NAME SCHULTZ, ARTHUR JAY
STREET ADDRESS 384 CAMERON DR
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VPST ☒ Change ☐ Addition
1.2 NAME SCHULTZ, ROCHELLE
1.3 STREET ADDRESS 701 LINCOLN ROAD - SUITE 103
1.4 CITY-ST-ZIP MIAMI BEACH, FLORIDA 33139

2.1 TITLE PD ☒ Change ☐ Addition
2.2 NAME SCHULTZ, ARTHUR J.
2.3 STREET ADDRESS 701 LINCOLN ROAD - SUITE 103
2.4 CITY-ST-ZIP MIAMI BEACH, FLORIDA 33139

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ARTHUR J. SCHULTZ (PRESIDENT) 4/22/96 (305) 531-4466

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)