

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # J85165**

1. Entity Name

**AMSTAR INSURANCE COMPANY**

Principal Place of Business

3401 NW 82ND AVE.  
STE. 100  
MIAMI FL 33122

Mailing Address

3401 NW 82ND AVE.  
STE. 100  
MIAMI FL 33122-1052

2. Principal Place of Business

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

6. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER  
THE CAPITOL  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE ZARRAGA, GASTON S 8202 LOS PINOS CIRCLE CORAL GABLES FL 33143	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERNANDEZ-SILVA, JORGE 3041 SW 54TH COURT MIAMI FL 33143	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NAON, ALBERTO 12471 SW 21 LANE MIAMI FL 33175	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V YAU, MICHAEL W. 7200 SW 131 ST MIAMI FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHAW, PETER W. 327 LAKE CREST CT FT LAUDERDALE FL 33326	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEVEGA, PRIMITIVO CLAUDIO COELLO, 123 28006 MADRID SP 33176	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVS FREYRE, PEDRO A. 8541 SW 72 TERR MIAMI FL 33143	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP 8041 SW 54 COURT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT FREYRE, ERNESTO 9040 SW 78 CT MIAMI FL 33176	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRASSA, JUAN A. ESQUINA CESAR GONZALEZ HATO REY PR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARXUACH, RAUL J. 3561 SW 142 AVE. MIRAMAR, FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	  28006 MADRID SPAIN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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

PEDRO A. FREYRE

4/12/00

Date

305 477-5552

Daytime Phone #

**FILED****Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90254 014 \*\*\*150.00

00065387



DO NOT WRITE IN THIS SPACE

AmSTAR Insurance Company  
(CONT'D)

Attach.

00065387

#J85165

-2-

V  
LEE, STEWART O.  
953 NW 168 AVE.  
PEMBROKE PINES, FL

D  
GARCIA-CASTELLON, G.  
AV. BLASCO IBANEZ, 2  
VALENCIA, SPAIN

AV  
DIANE M. DEPPEN  
13940 SW 91 TERR  
MIAMI FL 33186