FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

ESTRELLAS PUBLISHING CORP.

FILED Mar 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					THE THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS	iffer mantt atatt åfatt miftet Affet iffet	
10100 N.W. 25TH STREET 10100 N.W. 25TH STREET							
MIAMI FL 33172 MIAMI FL 33172					DO NOT WRITE IN THIS SPACE		
•					3. Date Incorporated or Qualified	THIS SPACE	
					10/19/1989		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		22-3007242	Applied For Not Applicable		
		Suite, Apt. #, etc.	uite, Apt. #, etc.			44	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28	28		· • •	Added to Fees	
Zip	Country	Zip	Country		B. This corporation owes or has paid to		
24	25	29	30		Personal Property Tax due June 30	–	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Regis	tered Agent	
l BP	Runjes, robert f.		81	Name	3		
10100 NW 25TH STREET				Stroot	t Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33172			82		Address (F.O. Box Number is Not Acceptable)		
			63				
			84	City		FL 85 Zip Code	
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 607.0505, Florida Statutes.							
SIGNATURE							
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent				nt signatur		DATE	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	PRINCES DAREST C	DELETE	1.1 TITLE			☐ Change ☐ Addition	
NAME	BRUNJES, ROBERT F.		1.2 NAME				
STREET ADDRESS	,		1.3 STREET ADDRESS				
CITY-ST-ZIP			1.4 CITY+S	T-ZIP			
TITLE			2.1 TITLE			Change Addition	
NAME	BOHORQUES, JOSE A.		2.2 NAME				
STREET ADDRESS	9385 SW 21ST STREET		2.3 STREET	ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE	P	☐ DELET e	3.1 TITLE		Galleria A. Anthony	Change Addition	
NAME	GELFAND, ARTHUR		3.2 NAME		SIELANDA INTENDA	100	
STREET ADDRESS			3.3 STREET	ADDRESS	Gelfand, Arthur One Executive Prive S Somerset NJ 088	4114 15/	
CITY-ST-ZIP	BE RNARDSVILLE NJ		3.4. CITY - 5	T-ZIP	Somerset NJ 088	73	
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADORESS			
CITY-ST-ZIP			4.4 CITY - S	T-ZIP			
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5 4 CiTY-S	T-ZIP			
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	adoress			
CITY-ST-ZIP			6.4 City-S	T-ZIP			

14. 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 turther 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 organization with an address.