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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M20128

1. Corporation Name

Suite, Apt. #, etc.

City & State

22

23

STAR YACHTS, INC.

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Principal Place of Business `	Mailing Address
1246 S.E. 12TH WAY FT. LAUDERDALE FL 33316-1798	1246 S.E. 12TH WAY FT. LAUDERDALE FL 33316-1798
2. Principal Place of Business	2a. Mailing Address

26

27

28

Suite, Apt. #, etc.

City & State

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90108 029 ***150.00



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

6. Election Campaign Financing

Trust Fund Contribution

5.- Certificate of Status Desired - -- - --

09/04/1985 4. FEI Number

59-2576144

Zip	Country	ZIP		Country		8. This corpo	ration owes the curre	•		_	
24	25	29	30				Property Tax.		Yes	□No	
,	9. Name and Address of Curre	nt Registered Agent				10. Name and	Address of New R	egistered A	gent		
	RSON, JONATHAN			81 82	Name	Address (P.O. Box Nu	mber is Not Accental	nle)			_
	6 S.E. 12TH WAY	•		02	Sueer	Address (F.O. Dox No	moci ia riot riotopiai	,			ļ
FT. I	LAUDERDALE FL 33316			83							
	·			<u> </u>				_	Ta-1 -		
				84	City			FĿ		ip Code	
office or I	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the obligi	of Florida. Such char	nge was autho	onzed by	the corpo	corporation submits to pration's board of directions	nis statement for the potential to the potential in the court of the c	ourpose of on the control of the con	hanging Iment as	; its registere 3 registered	3 0
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable	/NOTE: Rea	istered Aner	t eignatura re	equired when reinstating)		DATE			ĺ
12.		ND DIRECTORS	(140 12.140)	13.	it bigilatal o it		CHANGES TO OFF	ICERS AND	DIREC	TORS IN 12	2
TITLE	P		ELETE	1.1 TITLE		PSTD			Chan		
NAME	PEARSON, JONATHAN			1.2 NAME			•				ļ
STREET ADDRESS	ANAN OUL ANTIL MAN			1.3 STREE	ADDRESS						l
CITY-ST-ZIP	FT. LAUD. FL			1.4 CITY-S	T-ZIP						
TITLE	D		DELETE	2.1 TITLE					☐ Chan	ige ∐Add	dition
NAME	PEARSON, BROWNE			2.2 NAME	l						
STREET ADDRESS	1246 SE 12TH WAY		J	2.3 STREE	TADORESS						J
-CITY-ST-ZIP	FT LAUDERDALE FL		, ,	2.4 CITY-5	T-ZIP		بخبي س		<u>:</u>		
TITLE			DELETE	3.1 TITLE					Chan	ge 🗌 Add	dition
NAME				3.2 NAME							
STREET ADDRESS	;			3.3 STREE	ADDRESS						
CITY-ST-ZIP				3.4. CITY-5	T-ZIP					 _	
TITLE			DELETE	4.1 TITLE					☐ Chan	nge 🗌 Add	dition
NAME			1	4. 2 NAME		,					
STREET ADDRESS				4.3 STREE	ADDRESS						
CITY-ST-ZIP				4.4 CITY-S	T-ZIP						
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NAME	İ			5.2 NAME		. `					ļ
STREET ADDRESS				5.3 STREE							
CITY-ST-ZIP			OCI CTC	5.4 CITY-S 6.1 TITLE	1-ZIP				Chan	nge	dition
TITLE		LIL	DELETÉ	6.2 NAME						a∘ □ vor	Sidoll
NAME	-			-	, ADDDESS	,					
STREET ADDRESS	Maria de la Carta de				T ADDRESS						j
CITY-ST-ZIP	certify that the information supplied w	with this files does	qualify for the	6.4 CITY-S		1 in Section 119 07/3)	(i) Florida Statutos I	further cert	fy that th	he informatic	
14. Thereby	certify that the information supplied v	viui unis illing does not	quainy for the	exempt	ion stated	a m Section 118.07(3)	u, rivida Statutes. I		ry ulcit li	I am an	

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 enanged, or on an estachment with an address, with all other like empowered.

Caraly Jonathan Pearson, Pres.

(954)523 - 8371