

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State
 05-23-2001 91172 050 ****70.00

DOCUMENT # N00000004995

1. Entity Name

STELLAR KIDS INC.

Principal Place of Business

**7394 HAZELWOOD CR
 LAKE WORTH FL 33467**

Mailing Address

**7394 HAZELWOOD CR
 LAKE WORTH FL 33467**

771401



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1094806

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MISTRETTA, JOHN
 7394 HAZELWOOD CR
 LAKE WORTH FL 33467**

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's signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	MISTRETTA, JOHN	
STREET ADDRESS	7394 HAZELWOOD CR	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	BLOCKSON, PAUL	
STREET ADDRESS	1802 PIERCE DR	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE	S	<input type="checkbox"/> Delete
NAME	LIMONTAS, FITZGERALD	
STREET ADDRESS	909 FERN STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	D	<input type="checkbox"/> Delete
NAME	CARSWELL, KENNETH	
STREET ADDRESS	5864 TRIPHAMMER ROAD	
CITY-ST-ZIP	LAKE WORTH FL 33463	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOFFMAN, RICK	
STREET ADDRESS	1324 GRSVENTURE CT	
CITY-ST-ZIP	FREEMONT CA	
TITLE	D	<input type="checkbox"/> Delete
NAME	SCHILLACE, ANTHONY	
STREET ADDRESS	7427 KINGSLEY CT	
CITY-ST-ZIP	LAKE WORTH FL 33467	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KATHY INGERSOLL	
STREET ADDRESS	7394 HAZELWOOD CR.	
CITY-ST-ZIP	LAKE WORTH FLA 33467	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOHN MISTRETTA **JOHN MISTRETTA** **4/29/01** **5619660720**

CR2E037 (10/00)