

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 30, 2002 8:00 am
Secretary of State

09-30-2002 90176 040 ***245.00

DOCUMENT # N99000002072

1. Entity Name

SOUTH FLORIDA ALL*STARS, INC.

Principal Place of Business

20911 JOHNSON STREET, SUITE 101
 PEMBROKE PINES FL 33029

Mailing Address

20911 JOHNSON STREET, SUITE 101
 PEMBROKE PINES FL 33029

2. Principal Place of Business

16861 SW 196th Ave #303

3. Mailing Address

16861 SW 196th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#303

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

Zip

33332

Country

USA

Zip

33332

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0922181

Applied For

Not Applicable

5. Certificate of Status Desired

Shewing - Non-Profit

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LOOMAR, L. GREGORY
 L. GREGORY LOOMAR, P.A.
 1152 N. UNIVERSITY DR.
 PEMBROKE PINES FL 33024

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
 min. will be \$236.25.

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 PTD
 NAME PHILLIPS, DEBI ☐ Delete
 STREET ADDRESS 940 NW 202 TERRACE
 CITY-ST-ZIP HOLLYWOOD FL 33029

TITLE D
 NAME SUST, MARYANNE ☒ Delete
 STREET ADDRESS 20911 JOHNSON STREET #101
 CITY-ST-ZIP HOLLYWOOD FL 33029

TITLE D
 NAME PHILLIPS, DOUGLAS ☐ Delete
 STREET ADDRESS 20911 JOHNSON STREET #101
 CITY-ST-ZIP HOLLYWOOD FL 33029

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PTD ☒ Change ☐ Addition
 NAME Debi Phillips
 STREET ADDRESS 3988 SW 141 Ave
 CITY-ST-ZIP DAVIE, FL 33330

TITLE S ☐ Change ☒ Addition
 NAME Laura Lubow
 STREET ADDRESS 1172 NW 184th Terr
 CITY-ST-ZIP Pembroke Pines, FL 33029

TITLE D ☒ Change ☐ Addition
 NAME Douglas Phillips
 STREET ADDRESS 3988 SW 141 Ave
 CITY-ST-ZIP DAVIE, FL 33330

TITLE D ☐ Change ☒ Addition
 NAME Mylyn Morales
 STREET ADDRESS 16861 SW 196th Ave #303
 CITY-ST-ZIP Pembroke Pines, FL 33332

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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 persons empowered.

SIGNATURE:

SIGNATURE

9/14/02 984 423-0996

CR2E037 (4/02)