2001 UNIFORM BUSINESS REPORT (UBR) Aug 06, 2001 8:00 am

1. Entity Name FIVE STAR CORVETTES, INC.					Secretary of State 08-06-2001 90074 008 ***150.00			
Principal Place of Business 661 NW 101ST TERRACE PLANTATION FL 33324		Mailing Address 661 NW 101ST TERRACE PLANTATION FL 33324						
2. Principal P 2341 Suite, Apt.		3. Mailing Address Suite, Apt. #. etc.			DO,NOT,WRI			
	NO PARK, FL	City & State			4. FEI Number Applied For Not Applicable			
zip 333 l		Zip	Country	5	6. Certificate of Status Desired		8.75 Add se Required	
	6. Name and Address of Current	Registered Agent		7.	. Name and Address of New I	Registered Ag	ent	
				Name				
LEVIN, MICHAEL D ESQ 1 EAST BROWARD BLVD., SUITE 1705			Street	Street Address (P.O. Box Number is Not Acceptable)				
FORT LAUDERDALE FL 33301								
•			City		FL Zip Code			e
8, The above	named entity submits this statement fo	or the purpose of changing its	registered office	or registered	agent, or both, in the State of Fl	orida.		
0.0.0.0.0.0	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent sign	ature required whe	en reinstating)	DATE	-	
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! Tax filing requirement and elects to do so. (See criteria on back) After September 12, Make Check Payable			,	be \$750.00 nt of State	10: Election Campaign Fi Trust Fund Contribution	on.	Ådded	O May Be
11.	OFFICERS AND	DIRECTORS	12.	//	ADDITIONS/CHANGES TO OFF			S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENGEL, RICHARD P JR 661 NW 101ST TERRACE PLANTATION FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			(Change	☐ Addition
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TITLE		☐ Delete	TITLE			. [Change	Addition

CITY-ST-ZIP 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.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY~ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

CITY-ST-ZIP

PERICHARD P. ENGEL JR.

Delete

☐ Delete

954-735-7100

⋛

☐ Change

Change

☐ Addition

Addition

7/31/01 Attachment 0#P00000037941 174193

From: Richard P Engel f. Juie Star Corvetles, clue.

To: Whom it may concern Is. Dept of State Division of Corporation

> I am writing to ask that I not be penalized for not filing the uniforn Busines report on time. Thos is the first time of was required to send in this form and el was unaware of this requirement. I did not receive the first notice and was shocked to find that I was late in fiting when I received - the second notice, Please help me with this situation by waving this late fee.

Sincerely Richard P. Engel G.