

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P01000023758**

1. Entity Name

NIGHT STAR GROUP, CORP.

NIC  
FL  
12/4/01  
AM  
R

FILED

02 AUG 26 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

8755 NW 168TH STREET  
MIAMI LAKES FL 33018

Mailing Address

8755 NW 168TH STREET  
MIAMI LAKES FL 33018

2. Principal Place of Business

3. Mailing Address

15476 NW 77th #624

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Miami Lakes, FL

Zip

Country

Zip

Country

33016

USA

4. FEI Number

65-1093879

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOPEZ, ANTHONY

5730 WEST 13TH COURT  
HIALEAH FL

Name

LOPEZ, Anthony

Street Address (P.O. Box Number is Not Acceptable)

8755 NW 168 St

City

MIAMI LAKES

FL

Zip Code

33018

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)

7-25-2002

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing Requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOPEZ, ANTHONY 8755 NW 168TH STREET MIAMI FL 33018 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

# Night Star Group

Innovative Business Solutions

July 26, 2002


Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

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To Whom It May Concern:

Night Star Group, Corp. did not receive the original UBR notice. We are attaching a check for the original \$150.00 filing fee.

Sincerely,



Anthony Lopez  
President