2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 18, 2002 8:00 am P01000091056 DOCUMENT # **Secretary of State** 1. Entity Name 03-18-2002 90030 035 ***150 00 GOLDSTAR PUBLISHING CO. Mailing Address Principal Place of Business 1761 W HILLSBORO BLVD. STE 321 1761 W HILLSBORO BLVD. STE 321 DEERFIELD BCH FL 33442 DEERFIELD BCH FL 33442 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 04-3587701 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BERNSTEIN, RICHARD H Street Address (P.O. Box Number is Not Acceptable) 1761 W HILLSBORO BLVD, STE 321 **DEERFIELD BCH FL 33442** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (9/01)☐ Addition Change ☐ Delete TITLE TITLE BERNSTEIN, RICHARD H NAME NAME CR2E034 1761 W HILLSBORO BLVD, STE 321 STREET ADDRESS STREET ADDRESS DEERFIELD BCH FL 33442 CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE NAME ALLEN, KAREN NAME 23205B FOUNTAINVIEW DR STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP CITY-ST-ZIP [7] Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.