

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 28, 2002 8:00 am**  
**Secretary of State**

02-28-2002 90074 030 \*\*\*150.00

0355355 AV

DOCUMENT # P01000096933

1. Entity Name  
**5 STAR MAINTENANCE, INC.**

Principal Place of Business      Mailing Address  
**4400 PGA BOULEVARD**      **4400 PGA BOULEVARD**  
**SUITE 201**      **SUITE 201**  
**PALM BEACH GARDENS FL 33410**      **PALM BEACH GARDENS FL 33410**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**2215 N. Military Tr. #E**      **P.O. Box**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State      4. FEI Number      Applied For  
**West Palm Beach, FL**      **West Palm Beach, FL**      **65-1146559**      Not Applicable  
 Zip      Country      Zip      Country      5. Certificate of Status Desired            \$8.75 Additional Fee Required  
**33409**      **Palm beach**      **33409**      **USA**

6. Name and Address of Current Registered Agent      7. Name and Address of New Registered Agent  
**COX, JACK S**      Name **Raymundo Romero Jr**  
**4400 PGA BOULEVARD**      Street Address (P.O. Box Number is Not Acceptable)  
**SUITE 201**      **2215 N. Military Tr #E**  
**PALM BEACH GARDENS FL 33410**      City **WLB**      FL      Zip Code **33409**

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: *Raymundo Romero Jr*      (NOTE: Registered Agent signature required when reinstating)      DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.       **FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PAZ, SERGIO</b> <b>4400 PGA BOULEVARD #201</b> <b>PALM BEACH GARDENS FL 33410</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Romero, Raymundo Jr.</b> <b>2215 N. Military Trail #E</b> <b>West Palm Beach, FL 33409</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Raymundo Romero Jr (D)*      Date *5/6/02*      Daytime Phone # *561 7199229*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)