

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 17, 2003 8:00 am**  
**Secretary of State**

03-17-2003 91063 015 \*\*\*158.75

**DOCUMENT # P02000025080**

1. Entity Name  
**GOLD STAR ENTERPRISES, INC.**



Principal Place of Business  
**7431 BUNION DRIVE  
JACKSONVILLE FL 32222**

Mailing Address  
**7431 BUNION DRIVE  
JACKSONVILLE FL 32222**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**01-0616086**

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**KEASLER, FRANK R JR  
HENDERSON LAW FIRM, P.A.  
4309 PABLO OAKS COURT STE 5  
JACKSONVILLE FL 32224**

7. Name and Address of New Registered Agent

Name **JOHN F. SIMPSON**  
Street Address (P.O. Box Number is Not Acceptable)  
**7431 BUNION DRIVE**  
City **JACKSONVILLE** FL Zip Code **32222**

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

**3-1-03**

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
SIMPSON, JOHN F  
7431 BUNION DRIVE  
JACKSONVILLE FL 32222**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 607, 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 like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

**3-1-03**

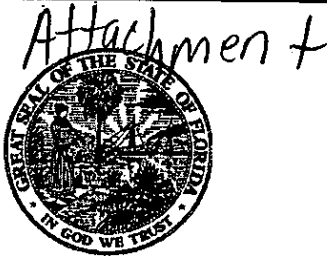
**(904) 908-5580**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)



80057886

FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 6, 2003

GOLD STAR ENTERPRISES, INC.  
7431 BUNION DRIVE  
JACKSONVILLE, FL 32222

Subject: GOLD STAR ENTERPRISES, INC.

Reference Number: P02000025080

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/MD  
ANNUAL REPORTS SECTION