

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000063367

1. Entity Name  
FOURSTAR INVESTMENT GROUP, INC.



Principal Place of Business  
13651 INDIAN PAINT LANE  
FT MYERS FL 33912

Mailing Address  
13651 INDIAN PAINT LANE  
FT MYERS FL 33912

2. Principal Place of Business

3. Mailing Address  
12580, ALLENDALE CR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

FORT MYERS, FL

City & State

City & State

Zip

Country

Zip

33912

Country

4. FEI Number

03 0454402

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HART, THOMAS B  
1625 HENDRY ST STE 301  
FT MYERS FL 33901

Name

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

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
	CHOWDHURY, SHOWKAT A	7381 FEATHERSTONE BLVD	SARASOTA FL 34238	
	PATWARY, MOHAMMED M	12580 ALLENDALE CIRCLE	FT MYERS FL 33912	
	PATWARY, DEBORAH A	12580 ALLENDALE CIRCLE	FT MYERS FL 33912	
	RAHMAN, MOHAMMED M	583 107TH AVE	NAPLES FL 34108	

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

CR2E034 (10/02)

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  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 02/18/03

Daytime Phone #

FILED  
Mar 07, 2003 8:00 am  
Secretary of State

02-21-2003 90239 041 \*\*\*150.00



☒ CHECK HERE IF MAKING CHANGES