

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90039 031 ***150.00

DOCUMENT # P02000087098	
1. Entity Name LA ESTRELLA DE MIAMI CORP.	

Principal Place of Business 7000 ISLAND BLVD UNIT WS-211 AVENTURA, FL 33160	Mailing Address 2875 NE 191 ST., SUITE 801 AVENTURA, FL 33810
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



02162004 Chg-P CR2E034 (10/03)

4. FEI Number 16-1621845		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	
SERBER, DANIEL J ESQ. SERBER & ASSOCIATES, P.A. 2875 NE 191 ST SUITE 801 AVENTURA, FL 33180		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.

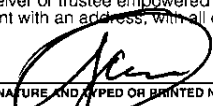
SIGNATURE _____ DATE _____

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 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CHEREM, JOSE	NAME	
STREET ADDRESS	7000 ISLAND BLVD UNIT WS-211	STREET ADDRESS	
CITY-ST-ZIP	AVENTURA, FL 33160	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CHEREM, MARY	NAME	
STREET ADDRESS	7000 ISLAND BLVD UNIT WS-211	STREET ADDRESS	
CITY-ST-ZIP	AVENTURA, FL 33160	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CHEREM, JACOBO S	NAME	
STREET ADDRESS	7000 ISLAND BLVD UNIT WS-211	STREET ADDRESS	
CITY-ST-ZIP	AVENTURA, FL 33160	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CHEREM, MAIR S	NAME	
STREET ADDRESS	7000 ISLAND BLVD UNIT WS-211	STREET ADDRESS	
CITY-ST-ZIP	AVENTURA, FL 33160	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CHEREM DE COHEN, ESTRELLA	NAME	
STREET ADDRESS	7000 ISLAND BLVD UNIT WS-211	STREET ADDRESS	
CITY-ST-ZIP	AVENTURA, FL 33160	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CHEREM DE ROMANO, SARINA	NAME	
STREET ADDRESS	7000 ISLAND BLVD UNIT WS-211	STREET ADDRESS	
CITY-ST-ZIP	AVENTURA, FL 33160	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:  **JOSE CHEREM** **2/19/04** **(305) 932-6262**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR