## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000072952

Name:

Address:

City-St-Zip:

PAREDES, RANDY A

MIAMI, FL 33175 US

13876 SW 56TH STREET #354

Entity Name: F.S. CORPORATION FUTURE STARS

FILED Oct 17, 2006 Secretary of State

Entity Nar	ne: F.S.CO	RPORATION FUTURE STARS			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
13876 SW # 354	56TH STRE	ΕΤ			
MIAMI, FL	33175 US	3			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
13876 SW # 354	56TH STRE	ET			
MIAMI, FL	33175 US	3			
FEI Number:	27-0863492	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
BETANCOURT, AIMARA N MRS. 13876 SW 56TH STREET # 354 MIAMI, FL 33175 US			13876 SW 56TH STF # 354	BETANCOURT, AIMARA 13876 SW 56TH STREET # 354 MIAMI, FL 33175 US	
The above in the State	named entity of Florida.	submits this statement for the p	urpose of changing its register	ed office or registered agent, or both,	
SIGNATURE: AIMARA BETANCOURT				10/17/2006	
	Electro	onic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BETANCOUR	TH STREET, #354	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PAREDES, EI	TH STREET, #354	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title <sup>.</sup>	s (	X) Delete	Title <sup>.</sup>	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: AIMARA BETANCOURT P 10/17/2006