

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000154613

Entity Name
WSTAR ART GALLERY, INC.



Principal Place of Business
1740 S. YOUNG CIRCLE
HOLLYWOOD, FL 33020-6820

Mailing Address
1740 S. YOUNG CIRCLE
HOLLYWOOD, FL 33020-6820



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2329469	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CREATIVE COMMUNITY DEV IN
BUCHANAN ST #606
HOLLYWOOD, FL 33019

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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.

NATURE 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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

100000397642
01/30/06-80058-015 150.00

OFFICERS AND DIRECTORS

PD
BERMAN-MILLER, CYNTHIA
1740 S. YOUNG CIRCLE
HOLLYWOOD, FL 330206820

VD
SILVERTHORNE, ANDREA
1740 S. YOUNG CIRCLE
HOLLYWOOD, FL 330206820

TD
MILLER, WILLIAM S
1740 S. YOUNG CIRCLE
HOLLYWOOD, FL 330206820

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cynthia B. Miller 1/20/06 954 922 0855
President

Date

Daytime Phone If