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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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Apr 28 1997 8:00am

Secretary of State

561-338-6242

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

City - St - Zir

SIGNATURE:

appears in Block 12 or Block 13 it shanged, or on an attachment with an address

7870 LAGO DEL MAR DR #123

DOCUMENT # P93000032298 (0)

Mailing Address

7870 LAGO DEL MAR DR #123

FIVE STAR SALES OF SOUTH FLORIDA, INC.

BOCA RATON FL 33433-4984 BOCA RATON FL 33433 3a. Date of Last Report 3. Date Incorporated or Qualified 05/03/1993 05/01/1996 Applied For 4. FEI Number 2. Principal Place of Business Mailing Address 65-0409075 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Country Country Zip This corporation has liability for intenglble tax under s. 199.032, Zin Yes 🔲 No 24 25 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name GOLDSTONE, RICHARD 2300 W SAMPLE RD 62 Street Address (P.O. Box Number is Not Acceptable) SUITE 202 83 POMPANO BEACH FL 33073 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. SECRETARY ITREASURER DELETE 1.1 TITLE TITLE LAWRENCE WALKER GIANGRANDE, JERI 1.2 NAME NAME 7870 HAGO DEL MAR #123 7870 LAGO DEL MAR DR #123 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33433** BOCA RATON, FL 33433 14 CiTY-ST-ZIP CITY-ST-ZIP Change Addition ___ DELETE 21 TITLE TITLE 22 NAME NAMI STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CHY-SI-ZiP Addition DELETE Change 31 TITLE THEF NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE THE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE Change DILE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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