FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000018150 (0)

NORTH STAR MANAGEMENT GROUP, INC.					 		
Principal Place of Business Mailing Address				1 1884/1601 1/8 1861 848/1 848/1 8	(111 61 111 1111 1)		
112 E CONCORD STREET ORLANOD FL 32801		112 E CONCORD STREET ORLANOD FL 32801					
				3. Date Incorporated or Qualified 03/03/1994	3a. Date	of Last R 03/20/1	
2. Principal P	lace of Business	2a, Mailing Address 26		4. FEI Number		→	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		59-3239819			Not Applicable
22		27		5. Certificate of Status Desired			Additional Required
City & Stat	0	City & State		6. Election Campaign Financing			0 May Be
23 Zip	Country			Trust Fund Contribution		Adde	d to Fees
24	25	29	Country 30	8. This corporation has liability for in florida Statutes	intangible tax	under s	199.032
	9. Name and Address of Current			10. Name and Address of New R		gent	
			81 Name				-
	TZARIS, DANIEL F		82 Street Add	iress (P.O. Box Number is Not Acceptab	le)		
120 S ORANGE AVE ORLANDO FL 32801			83	- /			
UNLA	INDO FL 32801		83				
			84 City		FL	85 Zg	Code
	to the provisions of Sections 607,0502 a red agent, or both, in the State of Florida th, and accept the obligations of, Section Signature, by ed or printed name of registered agent as	n 607.0505, Florida Statut	rued by the corporation's boates.	ro of directors. I hereby accept the appo	ointment as n	iging its ri egistered	egistered office agent. I am
12.	OFFICERS AND		NOTE: Regulated Agent separature recon-	ADDITIONS/CHANGES TO OFF	DA'E	Diricalo	/ IO IN I AO
TOTLE	Р	DELETE	1 1 TULE	ADDITIONS OF A NGES TO OFFI		Change	Addition
NAME	CHEROS, GEORGE E		. 1.2 NAM(,				···-
STREET ADDRESS	112 E CONCORD STREET		1.3 STREET ADDRESS				
CHY-SI-ZIF THEF	ORLANDO FL	☐ DELETE	14 CiTY-ST-7/P				
NAME		[_] been	2 1 1/11E 2 2 NAM?		LJ	Change	Addition
STREET ADDRESS	İ		2.3 STREET ADDRESS				
- 61-7 1F			2 4 CITY - ST - ZIP	,			
TITLE		Delete	3 1 1 IT LE			Change	Add tion
NAME DZWEL EDODEGO			3.2 NAME				
STREET ADDRESS CHY-SE-ZIP			3.3 STREET ADDRESS				
Title		[] DELETE	34 C(TY-ST-Z-P) 4 1 T(TLE			Change	Addition
NAME			4.2 NAME			Grange	LT MOUNTUIT
STREE! ADDRESS			4.3 STREET ADDRESS				
CITY-S1-ZP			4.4 CITY - S1 - ZIP				
TILE		DELETE	\$ 1 TiTuE			Change	☐ Ado tion
NAME SESSES ADDOCUS			5.2 NAME				
STREET ADDRESS CHY-ST-ZIP			53 STREET ADDRESS				
TITLE		DELETE	6 4 C-1Y - ST - ZiP	·		Channe	
NAME			6.2 NAME		LJ	Change	Addition
STREET ADDRESS			6.3 STREET ADDRESS				

14. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Hurther certify that the information indicated on this annual report of 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 turning empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cylanged, or on an attachment with a address.

SIGNATURÉ:

TURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/96

107-839-5070 Dayt me Prione CR2E034 (12/95)