## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000010729 (8)

STARS LIMITED OF SOUTH FLORIDA, INC.

Principal Place of Business

Mailing Address

5000 VISTA LINDA LANE

5968 VISTA LINDA-LANE

## **FILED** Apr 28 1998 8:00am Secretary of State



BOOA-RATON_EL-23433		BOGA RATON FL 88493			DO NOT WRITE IN THIS SPACE				
					ļ	3. Date Incorporated or Qualified			
						02/08/1995			
	lace of Business	2a. Mailing Address	1.1	2/	7	4. FEI Number	A	pplied For	
21 1809 W Hillsboro Blug 26 1809 W Hillsb.				o 134	10	65- <b>05</b> 55221		ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					İ	5. Certificate of Status Desired		Additional equired	
23 DEER tield Beach, FL 28 DEER Field Box			Banch	PC		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip_	Country	Zip	Country			8. This corporation owes or has paid the cu			
24 33yy 2 25 U S A 29 33 YY 2 30 (				JA -		Personal Property Tax due June 30.		□ No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
BROMBERG, ARTHUR									
5968 VISTA LINDA LANE				82 Street Address (P.O. Box Number is Not Acceptable)					
BOCA RATON FL 33433									
			83						
			84	City		. FI	<b>85</b> Zip	Code	
11. Pursuant to the provisions of Soctions 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 (amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
12.	Signature, typed or printed name of registered agricl OFFICERS AND		legistered Age	ant signature	required	when reinstating) DATE	D DIDECTO	00.151.40	
TITLE	PD	DELETE	1.1 TITLE		· · · <del>·</del> · · · · ·	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change	Addition	
NAME	BROMBERG, ARTHUR		1.2 NAME				C orange	7,007,011	
STREET ADDRESS	5968 VISTA LINDA LANE		1.3 STREET	ANDBESS					
CITY-ST-ZIP	BOCA RATON FL 33433		1.4 CITY-S						
TITLE	VD	DELETE	2.1 TITLE	71-211			Change	Addition	
NAME	BROMBERG, SUSAN E	<del></del>	2.2 NAME						
STREET ADDRESS	5968 VISTA LINDA LANE		2.3 STREET	ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33433		2.4 CITY-						
TITLE	good harrow to both	DELETE	3 1 TITLE	01 2.0			Change	Addition	
NAME	•	32 h		l			•		
STREET ADDRESS			3.3 STREET	ADDRESS					
CfTY-ST-ZIP			3 4. CITY-	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				☐ Change	☐ Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS				1	
CITY-ST-ZIP			4.4 CITY - S	IT-ZIP					
TITLE		DELET <b>e</b>	5.1 TITLE				Change	Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	ADDRESS				1	
CITY-ST-ZIP			5.4 CITY - S	T-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS		••			
CITY-ST-ZIP			6.4 CITY - S						
14. Thereby 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.									