1998



FLORIDA DEPARTMENT OF STATE

8andra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000031403 (5)

HOMESTAR DEVELOPMENT CORPORATION

FILED

98 JUL 27 AM 8: 09

SECRETARY OF STATE TALLAHASSEE. FLORIDA



| Principal Place of Business | | Mailing Address | Mailing Address | | | - i i i i i i i i i i i i i i i i i i i | |
|---|--|-------------------------------|---------------------------------------|--|---------------|--|------------------------------|
| 12000 BISCAYNE BLVD #401 | | | 12000 BISCAYNE BLVD #401 | | | | |
| MIAMI FL 33181 | | MIAMI FL 33181 | MIAMI FL 33181 | | | DO NOT WRITE IN THIS SPACE | |
| ĺ | | | | | | 3. Date Incorporated or Qualified | |
| l | | | | | | 04/21/1995 | |
| 2. Principal P | lace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 | | 26 | | | | 65-0607275 | Not Applicable |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | <u> </u> | | | o. Contract of Carda Booling | Fee Required |
| City & Stat | е | City & State | | | | 6. Election Campaign Financing | \$5.00 May Be |
| Zip Country | | 28 | | | | Trust Fund Contribution | Added to Fees |
| Zip | 25 | Zip 29 | 30 | Country | | 8. This corporation owes or has paid the curry | nt year Intangible Yes No |
| [24] | 9. Name and Address of Currer | | [30] | 30] | | Personal Property Tax due June 30. 10. Name and Address of New Registered A | |
| FORMOSO-MURIAS, HECTOR ESQ. | | | | | Name | to. Itamo and Address of New Hogisterior | |
| FORMOSO-MURIAS, P.A. | | | | <u> </u> | | | |
| | I BRICKELL AVENUE, PENTHOU | ISF | 82 Street A | | Street Addre | ddress (P.O. Box Number is Not Acceptable) | |
| | VI FL 33131 | · ~= | | 83 | | | |
| [| | | ! | | · | | |
| | | | | 84 | City | FL | 85 Zip Code |
| 11. Pursuant | to the provisions of sections 607.050 | 2 and 607.1508, Florida Stat | utes, the ab | ove- | named corpora | ation submits this statement for the purpose of chu | Inging its registered |
| office or registered agent, or both, in the State of Ftorida. 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: Re | | | | Registered Agent signature required when reinstating) DATE | | | |
| 12. | | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | D DIRECTORS IN 12 |
| TITLE | DSP CANCUEZ MARIO M | DELETE | · · · · · · · · · · · · · · · · · · · | | | L | Change Addition |
| NAME | SANCHEZ, MARIO M 12000 BISCAYNE BLVD #401 | | | 1.2 NAME | | 400002606 | 8045 |
| MARIE PL GOADA | | | 1.3 STREET ADDRESS | | - 1 | 4000026068045 -08/04/98- -0 1049002 | |
| CITY-ST-ZIP TITLE | | | 1.4 CF 2.1 TJT | | -ZIP | ****150.00_****150.00 | |
| NAME | OFFICENCY CONTINUES 4 | | | | L | Change Addition | |
| STREET ADDRESS | | | | 2 2 NAME 2.3 STREET ADDRESS | | | |
| CITY-ST- | a state of the same | | | | | | |
| TITLE | DT DELETE | | | 2.4 CITY-ST-ZIP 3.1 TITLE | | | Change Addition |
| NAME | ALAMAN LALLON | | | 3.2 NAME | | ı | Change [Addition |
| STREET ADDRESS | ARRAN DISCASSIE DI LIDI HANA | | 4 | 3.3 STREET ADDRESS | | | |
| | CITY-ST-ZIP MIAMI FL 33181 | | | 3.4 CITY-ST-ZIP | | | |
| TITLE | | | | 4.1 TITLE | | | Change Addition |
| NAME | | | 4.2 NA | 4.2 NAME | | • | - Surange Madagali |
| STREET ADDRESS | | | | | ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CIT | | | | |
| TITLE | | | .1 TITLE Change Addition | | | | |
| NAME | - | | 5.2 NA | 5.2 NAME | | • | |
| STREET ADDRESS | EET ADDRESS | | 5.3 STI | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CIT | TY-ST- | .ZIP | | |
| TITLE | DELETE | | | 6.1 TITLE | | | Change Admition |
| NAME | | | 6.2 NA | ME | | _ | / Id 11 |
| STREET ADDRESS | | | 6.3 ST | REET | ADDRESS | | / / % /\ / |
| CITY-ST-ZIP 641 | | | 6 4 CIT | TY-ST- | ZIP | | (1/4/) |
| 44 Ibaaabu a | while that the information complied with | This films does not available | r the even | dian. | -4-4 (| on 110 07(3)(i) Clorida Statutas, Lituthas aprifuit | and the Alle Comments of |

4. I 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 it am officer or director of the corporation or the stories or investor in the stories or investor in the stories of the corporation of the corpora

MAURO B NANNINI MIZI

X12/98 205-850 1000

CR2E034 (5/98)





MJ 2

13 July, 1998

Florida Department of State Division of Corporations Tallahassee, Florida 32314

Dear sirs:

On April 20,1998 we filed our original Florida Profit Corporation Annual Report. We included our check numer 1445 in the amount of \$150 payable to Department of State. Apparently, this correspondence was lost in the mail. Please accept this, our second attempt at filing the Annual Report.

Please do not hesitate to contact me should you have any questions.

Sincerely.

Mauro B. Nannini

Treasurer