

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000031403

1. Entity Name

HOMESTAR DEVELOPMENT CORPORATION

Principal Place of Business

Mailing Address

1200 Biscayne Blvd. #401
Miami, FL 33181

FILED

00 APR 11 AM 11:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

575 Crandon Blvd.

Suite, Apt., #, etc.

Apt. #709

City & State

Key Biscayne, FL

Zip

33149

Country

USA

3. Mailing Address

Suite, Apt., #, etc.

City & State

Zip

Country

USA

6. Name and Address of Current Registered Agent

FORMOSO-MURIAS, HECTOR ESQ.
1001 Brickell Avenue, Penthouse
Miami, FL 33131

7. Name and Address of New Registered Agent

Name STEVEN H. HIBBE

Street Address (P.O. Box Number is Not Acceptable)

501 BRICKELL KEY DRIVE, SUITE 400

City MIAMI

FL

Zip Code 33131

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fee

11. OFFICERS AND DIRECTORS

TITLE DSP
NAME SANCHEZ, MARIO M.
STREET ADDRESS 12000 Biscayne Blvd., #401
CITY-ST-ZIP Miami, FL 33181 ☒ DELETE

TITLE DP
NAME GUILLERMO, FERNANDEZ A.
STREET ADDRESS 12000 Biscayne Blvd., #401
CITY-ST-ZIP Miami, FL 33181 ☒ DELETE

TITLE DT
NAME NANNINI, MAURO
STREET ADDRESS 12000 Biscayne Blvd., #401
CITY-ST-ZIP Miami, FL 33181 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

1.1 TITLE DPS
1.2 NAME THIRE, ERIC V. YANEZ
1.3 STREET ADDRESS 501 Brickell Key Drive Suite 400
1.4 CITY-ST-ZIP Miami, FL 33131 ☐ Change ☒ Addition

2.1 TITLE DVPT
2.2 NAME CAPRILES-JAMES, NATALI
2.3 STREET ADDRESS 501 Brickell Key Drive Suite 400
2.4 CITY-ST-ZIP Miami, FL 33131 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 11 or Block 12 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

NATALI CAPRILES, DIRECTOR AND VICEPRESIDENT (305) 365 8139

Date MAR 06, 27, 2000

Daytime Phone #