**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P95000067379**1. Corporation Name

BLUE STAR REALTY, INC.

## **FILED** Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90102 007 \*\*\*150.00



Principal Place of Business Mailing Address								1147 18888 14114	100,000,000,
3401 N. FEDERAL HGWY STE. 216 3401 N. FEDERAL HGWY ST BOCA RATON FL 33431 BOCA RATON FL 33431						DO NOT WRIT	E IN THIS	SPACE	
						3. Date Incorporated or Qualifed 08/31/1995			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
21	26					65-0614939		No	ot Applicable
Suite, Apt.	Suite, Apt. #, etc.	Jite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 / Fee Re	<b>I</b>	
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	
Zip	Country	Zip	Cour	ntry		8. This corporation owes the curre	nt year Inta		
24	25	29 3	0		_	Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent		81		10. Name and Address of New R	egisterea /	Agent	
HUB	VITZ, MICHAEL D			81	Name				
3401 N. FEDERAL HWY #216 BOCA RATON FL 33431					Street Addre	ss (P.O. Box Number is Not Accepta	ble)		
DUC:	A MATON FE 33431			83					
					City		FL	'	Code
<ul> <li>office or re</li> </ul>	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligat	of Florida. Such change was aut	nonzea	ιονιπ	named corpo e corporation	ration submits this statement for the label of directors. I hereby acception	ourpose of t the appoir	changing its ntment as re	registered gistered
SIGNATURE									
SIGNATORE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: R	egistered	Ágent s	ignature required		DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO Change	DRS IN 12  ☐ Addition
TITLE	D	_ DELETE	1.1 TIT	Œ				□ ¢nange	
NAME	HORVITZ, MICHAEL		1.2 NA		1				
STREET ADDRESS	3401 N. FEDERAL HGWY., STE	:. 216	1.3 ST	REETA	DDRESS				
CITY-ST-ZIP	BOCA RATON FL 33431			TY-ST-Z	IP			Change	Addition
TITLE	D	☐ DELETE	2.1 TIT					□ Citalige	
NAME	MADRIS, RUSSELL	. 040	2.2 NA			•			
STREET ADDRESS	3401 N. FEDERAL HGWY., STE	216			DDRESS	•	~·	<del></del>	
CITY-ST-ZIP	BOCA RATON FL 33431			TY-ST-	ZIP			Change	[ ] Addition
TITLE		☐ DELETÉ	3.1 TII						
NAME	<i>,</i>		3.2 NA						
STREET ADDRESS					DDRESS				ŀ
CITY-ST-ZIP		☐ DELETE	3.4. CI 4.1 TIT	ITY-ST-	ZIP			☐ Change	Addition
TITLE			4.1 111 4. 2 N						****
NAME					DUDES				
STREET ADDRESS			1		DDRESS	•			
CITY-ST-ZIP		☐ DELETE	5.1 TIT	TY-ST-Z	LIF			☐ Change	Addition
TITLE			5.2 NA						
NAME					DORESS				
STREET ADDRESS				TY-ST-	- 1				ļ
CITY-ST-ZIP		☐ DELETE	6.1 717				•	☐ Change	☐ Addition
			6.2 NA	ME				-	
NAME					DDRESS				
STREET ADDRESS				TY-ST-					

14. 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 supplier ental 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 of the receiver or flustee 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 a grattachment with an address, with all other like empowered.

SIGNATURE:

3/19/99 561 367 1188

Daytime Phone #