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

ELORIDA DEPARTMENT DE STATE

**PROFIT** 

## Aug 17 1998 8:00am **CORPORATION** Secretary of State Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000095062 AMENDED SELECT STAR CORPORATION Principal Place of Business Mailing Address 7900 Nova Drive #101 Davie, FL 33324 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/11/95 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0635141 Not Applicable 21 Suite Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 🔼 Yes ☐ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Myriam Cohen 7900 Nova Drive #101 Street Address (P.O. Box Number is Not Acceptable) Davie, FL 33324 City 7ip Code 85 11. Pursuant to the provisions of Sections 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 familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Mynam Cohen Myr1 Myriam Cohen NOTE. Registered Agent a greature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 10118 1.2 NAMS Myriam Cohen 9921 SW 23rd Street Ft. Lauderdale, FL 33301 STREET AUDRESS 1.3 STREET ADDRESS CHY-SI-70 14 CHY-ST-7P DELETE Change Addition 2.1 TITLE TITLE VP/n 2.2 NAME NAME H. Dennis Cohen STREET ADDRESS 9921 SW 23rd Street 2.3 STREET ADDRESS 2 4 CHTY - ST - 21P CHY-\$1-76 Pt. Lauderdale, FL 33301 Change Addition 3.1.1111.6 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY ST ZIP 3.4. Off Y - ST - ZIP ☐ Change DELETE Addition TITU 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - St - ZiP CHY-\$1-70 DELETE 5 1 1111.6 □ Change Addition TILLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ACCURES 5.4 G.TY - \$1 - 712 OFF ST ZE DELETE. Add tion 1111 F 6 1 11101 **8000026179**68°° -08/17/98--01123--034 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS \*\*\*61.25 6.4 CHY SS-ZIP 14. Thereby certify that the information supplied with this filing coes not qualify for the exemption state in Section 119.07(3)(i). Fiorida 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 eath, 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.

Myriam Cohen, President

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