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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

---- B. Mortham) Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000029917 (7)
STARDREAM ENTERPRISES, INC.

FILED Jun 19 1997 8:00am Secretary of State



2552 HOLLYWOOD BLVD. BUITE 205 HOLLYWOOD FL 33020	SUITE 205 HOLLYWOOD FL 33020-485	6		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	3. Date Incorporated or Qualified 04/05/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1 2143 NOVAVILLAGE DA		VERSITY DR.	65-0660840	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	-	5. Certificate of Status Desired	\$8.75 Additional
2	27 Juite 336			Fee Required
City & Stale	City & State 28 DAVIE A	=2	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	28 (14 VIE) 7(r)	Country	8. This corporation has liability for i	
33317. 25 USA	33324	30 USA	Florida Statutes	Yes No
9. Name and Address of C			10. Name and Address of New Re	gistered Agent
KOVARIK, SUSAN		81 Name <	USAN KOVARIK	
2632 HOLLYWOOD BLVD.			ess (P.O. Box Number is Not Acceptab	(e)
SUITE 205		2143	NOVA VILLAGE DR	•
HOLLYWOOD FL 33020		83		
		84 City 7		85 Zip Code
		JAN JAN	lie	FL 333 19
 Pursuant to the provisions of Sections 60 office or registered agent, or both, in the 	7.0502 and 607.1508, Florida Statule	se tha above-named corry	oration eubmite this statement for the n	urpose of changing its registered
office or registered agent, or both, in the agent, I am familiar with, and according	State of Florida. Such change was a obligations of, Section 607.0505, Flo	rida Statutes.	on's board of directors, thereby accep	if the appointment as registered
SIGNATURE	5	113AN KOV	ARIK 4	125/91
Signature, typed or print a name of registe		: Registered Agent signature require		DATE
	S AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
The Tresident				
IME SUSAN KOVAI	21K	1.2 NAME		•
THE PRESIDENT SUSAN KOVAI STREET ADDRESS 2143 NOVA VIL STYLY ST-ZIP BAVIE, FL	LAGE DR	1.3 STREET ADDRESS		•
TITY-ST-ZIP BAVIE, FL 3	DELETE	14 City-St-ZIP 21 Title		Change Addition
	1 50000	2.2 NAME		
NAME Street address		23 STREET ADDRESS		
OTY-ST-ZIP		2 4 City-ST-ZIP		
ITLE	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-\$1-ZIP		3.4. C(1) Y - ST - Z(P		
TITLE	DELETE	4.1 TOTLE		Change Addition
AME .		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-7IP		
TITLE	DELETE	6.1 THLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP	440 07/07/20 52	a 1 f. with an annual first and all a
14. I do hereby certify that the information si information indicated on this annual report I am an officer or director of the corpora appears in Block 12 or Block 13 if pheny	ort or supplemental annual report is ti tion or the receiver or trustee empow	rue and accurate and that rered to execute this repor	my signature spall have the same lega	al effect as il made under dain: in