

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

04-22-2002 90191 022 ***150.00

DOCUMENT # P97000011588

1. Entity Name

T - STAR DISTRIBUTOR, INC.

Principal Place of Business

18598 NW 22 STREET
 HOLLYWOOD FL 33029

Mailing Address

256 NW 42 AVE
 MIAMI FL 33126
 US

2. Principal Place of Business

5700 SW 127 ave

3. Mailing Address

Suite, Apt. #, etc.

Suite 1302

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33183

Country

US

Zip

Country

4. FEI Number

65-0744464

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

STEWART, GEORGE A
 18598 NW 22 STREET
 HOLLYWOOD FL 33029

7. Name and Address of New Registered Agent

Name

Garcia Esther

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

5700 SW 127 ave Ste 1302

City

Miami

FL

Zip Code

33183

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

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

ESTHER GARCIA DP/D 5-7-02
 (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, 2002 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 Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STEWART, GEORGE A 18598 NW 22 STREET HOLLYWOOD FL 33029	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEWART, GEORGE 6175 NW 167 ST S-617 MIAMI FL 33015	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Garcia Esther 5700 SW 127 ave Ste 1302 Miami FL 33183	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Garcia Esther 5700 SW 127 ave Ste 1302 Miami FL 33183	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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:

George A Stewart
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.8.02 (305) 888.2700
 Date Daytime Phone #

CR2E034 (9/01)