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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000031894 (3)

FIVE STAR PROPERTIES GROUP, INC.

FILED Apr 08 1998 8:00am Secretary of State

Change

Change

Addition

Addition

Principal Place of Business Mailing Address 306 S E MONTEREY ROAD 306 S E MONTEREY ROAD STUART FL 34994 STUART FL 34994 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/07/1997 4. FEI Number 074026 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Zip Country Zip Country 24 ☐ Yes 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **EDWARDS, CHESTER J** 306 S E MONTEREY ROAD Street Address (P.O. Box Number is Not Acceptable) STUART FL 34994 83 84 City 85 Zip Code 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 Signature, typed or printed name of registered rigidal and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE EDWARDS, CHESTER J 1.2 NAME NAME CR2E034 306 SE MONTEREY RD 1.3 STREET ADDRESS STREET ADDRESS STUART FL 34994 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE TITLE michele Maquire 45 S. Kanner Hwy. FINDON, HARRY F NAME 2.2 NAME 6500 N MILITARY TR #96 STREET ADDRESS 2.3 STREET ADDRESS W PALM BEACH FL 33407 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE MALAF 4. 2 NAME

6.4 CiTY-ST-ZIP

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 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 12 or Block 13 if changed, or on an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADORESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY - ST- ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

DELETE

DELETE

SIGNATURE: 646 REL J. EDUALDS 10-8 4/1/42 305/624771