## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Sep 20, 2000 8:00 am Secretary of State DOCUMENT # P9700043061 1. Entity Name 5 STAR VISION, INC. 09-20-2000 90005 038 \*\*\*550.00 Principal Place of Business Mailing Address 9398 A. ARLINGTON EXPWY 9398 A. ARLINGTON EXPWY JACKSONVILLE FL 32225 JACKSONVILLE FL 32225 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3447138 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HARAMIS, LEE S ESQ Street Address (P.O. Box Number is Not Acceptable) 200 N. LAURA ST 12 FL JAX FL 32202 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition PTD TITLE ☐ Delete TITLE MILLS, C DAVID NAME NAME Mills, C David STREET ADDRESS STREET ADDRESS 13664 SHIPWATCH DRIVE 13664 Shipwatch Drive CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32225 Jacksonville, FL 32225 Delete ☐ Change ☐ Addition TITLE TITLE NAME NOISETTE, ANDRE NAME STREET ADDRESS STREET ADDRESS 13664 SHIPWATCH DRIVE CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32225 Change TITLE ☐ Delete TITLE ☐ Addition VSD NAME FIGUEROA, WILLIAM J NAME Figueroa, William J STREET ADDRESS STREET ADDRESS 13664 SHIPWATCH DRIVE 13664 Shipwatch Drive CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32225 Jacksonville, FL 32225 VSD Delete TITLE ☐ Addition NAME MANNING, DANIEL E NAME STREET ADDRESS STREET ADDRESS 13664 SHIPWATCH DRIVE CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32225 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 William

changed, or on an attachment with an address, with all other like empowered