

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000047351 (6)

1. Corporation Name

SOUTHSTAR MANAGEMENT, INC.



Principal Place of Business

Mailing Address

3901 S. OCEAN BLVD.
HIGHLAND BEACH FL 33487

3901 S. OCEAN BLVD.
HIGHLAND BEACH FL 33487

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 751 Park of Commerce Dr		26 751 Park of Commerce Dr		05/29/1997	
22 Suite, Apt. #, etc. #128		27 Suite, Apt. #, etc. #128		4. FEI Number 58-2321367	
23 City & State Boca Raton, FL		28 City & State Boca Raton, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip 33487		29 Zip 33487		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 Country Palm Beach		30 Country Palm Beach		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
PECHTER, MARTIN H 3901 S. OCEAN BLVD. HIGHLAND BEACH FL 33487				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83 #128	
				84 City Boca Raton	
				85 Zip Code 33487	

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 agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Martin Pechter	1.2 NAME	
STREET ADDRESS	751 Park of Commerce Dr - #128	1.3 STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33487	1.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jack Pechter	2.2 NAME	
STREET ADDRESS	751 Park of Commerce Dr - #128	2.3 STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33487	2.4 CITY-ST-ZIP	
TITLE	Secretary <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeffrey Pechter	3.2 NAME	
STREET ADDRESS	751 Park of Commerce Dr - #128	3.3 STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33487	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 or supplemental 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.

SIGNATURE _____ 4-15-98 (901) 982-7770

CR2E034 (10/97)