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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P97000051980**1. Corporation Name

WHITE STAR GEMS, INC.

Principal Place of Business
518 E COLONIAL DRIVE ORLANDO FL 32803

2. Principal Place of Business

Mailing Address

2a. Mailing Address

518 E COLONIAL DRIVE ORLANDO FL 32803

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90092 019 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

06/11/1997 4. FEI Number

		26			59-3465648		Applicable
1 j Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
2		27			5. Certificate of Status Desired	Fee Rec	quired
City & State City & State				6. Election Campaign Financing	\$5.00		
3	_, <u>, , , , , , , , , , , , , , , , , , </u>	28		-	Trust Fund Contribution	Added to	Fees
Zip	Country	Zíp	Countr	У	8. This corporation owes the current ye	_	
4	25	29	30		Personal Property Tax.		∐No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Regis	ered Agent	
DUD	00E 101BLE ID		8	1 Name			
	OSE, JOHN E JR		8:	82 Street Address (P.O. Box Number is Not Acceptable)			
518 E COLONIAL DRIVE							
ORLA	ANDO FL 32803		8:	3	•		
			8	A City		85 Zip C	ode
			•	4 City		FL S Z S	
11 Pursuant 1	to the provisions of Sections 607.050	2 and 607,1508, Florida State	utes, the abo	ve-named corp	poration submits this statement for the purpo	ose of changing its	registered
office or re	enistered agent, or both, in the State.	of Florida. Such change was	autnorized o	y tne corporati	on's board of directors. I hereby accept the	appointment as rec	jistered
agent. I ar	m familiar with, and accept the obliga	tions of, Section 607.0505, Fi	onda Statute	9 S,			
SIGNATURE			F. D. Satarad A.	ent signature require	od when reinstating)	ATE	
12.	Signature, typed or printed name of registered ager	ID DIRECTORS	13.	ent signature require	ADDITIONS/CHANGES TO OFFICE		RS IN 12
TITLE	PSD	DELETE	1.1 TITLE			☐ Change	Addition
	DUBOSE, JOHN E		1.2 NAME				
NAME				ET ADDRESS			
STREET ADDRESS	518 E COLONIAL DRIVE		•				
CITY-ST-ZIP	ORLANDO FL 32803		1.4 CITY- 2.1 TITLE			☐ Change	Addition
TITLE	VTD		2.1 HILE				_
NAME	CHURCHILL, NANCY F						
STREET ADDRESS	518 E COLONIAL DRIVE			ET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32803		2. 4 CITY			Change	Addition
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	*	- u - ann	- 3.2 NAME			and Table 1	
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officer or director of the corp Block 12 or Block 13 if char

SIGNATURE: