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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000056683 (0)

CHEERS & STARS OF AMERICA, INC.

FILED Apr 13 1998 8:00am Secretary of State



| Principal Plac | Address | | | | | | | | | |
|-------------------------|---------------------------------------|---------------------------------|---------------------|---|-------------|---|---|---|--|--|
| 11631 SW 10 STREET | | | 11631 | 11631 SW 10 STREET | | | | | | |
| PEMBROKE PINES FL 33025 | | | PEMB | PEMBROKE PINES FL 33025 | | | | | | |
| | | | | | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | | | 3. Date Incorporated or Qualified 06/26/1997 | | |
| 2. Principal F | Place of Busin | 2a . Mai | 2a. Mailing Address | | | | 4. FEI Number Applied For | | | |
| 21 | | | 26 | | | | | Not Applicable | | |
| Suite, Apt. #, etc. | | | Suit | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional | | |
| 2 | | | 27 | + · · · · · · · · · · · · · · · · · · · | | | | Fee Required | | |
| — | City & State | | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | |
| 23 | | | 28 | 4 | | | | Trust Fund Contribution Added to Fees | | |
| Zip | - | Country | Žip | | \vdash | ountry | | 8. This corporation owes or has paid the current year Intangible | | |
| 24 | | 25] | 29 | | 30 | | | Personal Property Tax due June 30. Yes No | | |
| | · · · · · · · · · · · · · · · · · · · | and Address of Curre | nt Hegistered | a Agent | | 10. Name and Address of New Registered Agent 81 Name | | | | |
| LONGERBEAM, MICHELLE | | | | | | " | ivame | le e | | |
| | 631 SW 10 | | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| PE | MBROKE P | INES FL 33025 | | | | | | 1964 was die des bestehen das des seines de la company | | |
| | | | | | | 83 | | | | |
| • | k. | | | | | 84 | City | 85 Zip Code | | |
| | | | | | | | , | FL 6 | | |
| 11. Pursuant | to the provisi | ons of Sections 607.05 | 02 and 607.15 | 508, Florida Statu | les, the | above | -named | ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered | | |
| agent. I a | am fam iliar wi | th, and accept the obli | gations of, Sec | ction 607.0505, FI | orida St | eu by atutes | . ITTE COI | orporations board of directors. Thereby accept the appointment as registered | | |
| SIGNATURE | | | | | | | | | | |
| | Signature, lyried | or printed name of registered a | | | E: Register | ed Age | nt signatur | ure required when reinslating) DATE | | |
| 12. | | OFFICERS AF | NO DIRECTOR | | 13 | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | | | | DELETE . | 1 | TITLE | | P- PRESIDENT Change Addition MONICA P. DOMPKOUSKI 11621 SW. 1045T. PEMBERICA PINES, FL 33U25 VALUE PRESIDENT I Change Addition Richard S. DOMPKOWSKI 11631 SW. 1045 ST. PEMBERICA PINES, FL 33025 VEICE PRESIDENT I Change Addition | | |
| NAME | | | | | 1.2 | NAME | | MONICA R. DOMPROUSE | | |
| STREET ADDRESS | | | | | | | ADDRESS | 5 11621 SW. 10381 | | |
| CITY-ST-ZIP | | | | | | CITY-SI | r- ZIP | pembloic fines, PC 33003 | | |
| TITLE | | | | DELETE | 2.1 | TITLE | 1 | Varice president I Change Addition | | |
| NAME | İ | | | | 2.2 | NAME | | Dichard J DOMPKOWIL | | |
| STREET ADDRESS | | | | | 2.3 3 | STREET | address | 1/631 SW. 1075 ST | | |
| CITY-ST-ZIP | | | | | 2. 4 | CHY-S | 1-21P | pembroke pines, FC 33003 | | |
| TITLE | | | | ☐ DELETE | 3.1 1 | TITLE | | VEICE president II Change Addition | | |
| NAME | | | | | 3.21 | NAME | | Michele Londerbeary | | |
| STREET ADDRESS | | | | | 3.3 | STREE1 / | ADDRESS | Michel Longerbeam 11631 5W. 10# 57. pembok Mines, FC 33025 | | |
| CITY-ST-ZIP | | | | | 3.4. | CITY-S | T-ZIP | pembora pines, FC 33005 | | |
| TITLE | | | | L. DELETE | 4.11 | IITLE | | SIDCICE 4875 SUBhange Cl Addition | | |
| NAME | | | | | 4.2 | NAME | | -04/14/9801018014 | | |
| STREET ADDRESS | | | | | 4.3 5 | STREET A | ADDRESS | ***150,00 | | |
| CITY-ST-ZIP | | ····· | | | 4.4 (| CITY - ST | - ZIP | | | |
| TITLE | | | | DELET e | 5.11 | TITLE | | 90002487599hange Addition -04/14/9801018015 | | |
| NAME | | | | | 5.2 | VAME | | - <u>04/14/98</u> n1n18n15 | | |
| STREET ADDRESS | | | | | 5.3 \$ | STREET A | ADDRESS | ****8.75 | | |
| CITY-ST-ZIP | | | | | 5.4 (| CITY-ST | - ZIP | annuth to | | |
| TITLE | | . —————————— | | DELETE | 6.1 1 | ITLE | | Change Addition | | |
| NAME | | | | | 6.21 | IAME | | PE 4.13 | | |
| STREET ADDRESS | | | | | 6.3 5 | TREET / | ADDRESS | s Pe | | |
| CITY-ST-ZIP | | | | | 640 | HTY-ST | - Z IP | 4.13 | | |
| 20 11 | 416 41 44 | | | | | | | | | |

4. 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 of rustee employeed 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.

Michelle Lea Frank donn

Tab I MADO LURUNUZI DOCE