

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000094606

1. Entity Name

BRIGHT STAR SILK SCREEN CORP.

FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90013 034 ***550.00

Principal Place of Business

4165 NW 132 ST. UNIT E
 OPALOCKA FL 33054

Mailing Address

4165 NW 132 ST. UNIT E
 OPALOCKA FL 33054

2. Principal Place of Business

4165 NW 132 ST

3. Mailing Address

4165 NW 132 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Opalocka, FL 33054

City & State

Opalocka, FL

4. FEI Number

65-0791697

Applied For

Not Applicable

Zip

Country

33054

USA

Zip

Country

33054

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DA COSTA, ANTONIO
 4165 NW 132 ST. UNIT E
 OPALOCKA FL 33054

7. Name and Address of New Registered Agent

Name DA COSTA ANTONIO

Street Address (P.O. Box Number is Not Acceptable)

4165 NW 132 ST

City Opalocka

FL

Zip Code 33054

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.)

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
 NAME DA COSTA, ANTONIO
 STREET ADDRESS 4165 NW 132 ST. UNIT E
 CITY-ST-ZIP OPALOCKA FL 33054 ☐ Delete

TITLE DVS
 NAME FOWERAKER, CARLOS
 STREET ADDRESS 4165 NW 132 ST. UNIT E
 CITY-ST-ZIP OPALOCKA FL 33054 ☐ Delete

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DA COSTA ANTONIO ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 4165 NW 132 ST
 CITY-ST-ZIP OPALOCKA, FL 33054

TITLE DVS ☒ Change ☐ Addition
 NAME FOWERAKER, CARLOS
 STREET ADDRESS 4165 NW 132 ST
 CITY-ST-ZIP OPALOCKA, FL 33054

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DA COSTA ANTONIO

Date

9/9/00 953790

Daytime Phone #

CR2E034 (5/00)