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 # P97000103088 (5)

SILVER STAR SQUARE, INC.

Principal Place of Business

Mailing Address

FILED Apr 22 1998 8:00am Secretary of State



112 HOLLIE COURT MAITLAND FL 32751		POST OFFICE BOX 940157 MAITLAND FL 32794-0157		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					12/08/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 1555 Howell Branch Rd. 26 P.O. Box 94				7	59-2482421	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
22 Suite C-208 27					5. Certificate of Status Desired	Fee Required
City & State City & State			•		6. Election Campaign Financing	\$5.00 May Be
	er_Park, FL 28 Maitland, FL				Trust Fund Contribution	Added to Fees
Zip	Country Zip Country		•	8. This corporation owes or has paid the		
24 32789	25 USA	29 32794	30 US	SA	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent	81	I Name	10. Name and Address of New Registere	ad Agent
	LL OG G, ROGER W		•"	Name		
112 HOLLIE COURT MAITLAND FL 32751				82 Street Address (P.O. Box Number is Not Acceptable)		·
				ļ		
:	•		83	'		
			84	City		85 Zip Code
		00 1500 F: 11 B		<u> </u>		
11. Pursuant	to the provisions of Sections 607.09 egistered agent, or both, in the State	02 and 607.1508, Florida Statu e of Florida. Such change was entogg of Soction 607.0605, Fl	tes, the above authorized to lorida Statut	ve-named cor by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	appointment as registered
_	m ta mılar witin, and accept the oblig	gations or, section 607.0305, m	ionua Siaiuk	78.		
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NO	Tt: Registered Ag	gent signature requ	uited when reinstating) DATI	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE			Change Addition
NAME	Kellogg, Roger W		1.2 NAME			
STREET ADDRESS	112 HOLLIE COURT		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	MAITLAND FL 32751		1.4 CITY-	ST-ZIP		
TITLE	D	DELETE 2.1				Change Addition
NAME	MITCHELL, JOHN C II		2.2 NAME			
STREET ADDRESS	221 NE IVANHOE BLVD. #2	10	2.3 STREE	T ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32804		2. 4 CITY	- ST- ZIP		
TITLE	DELETE		3.1 TITLE			Change Addition
NAME			3.2 NAME	.		
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY	- ST- ZIP		
TITLE	☐ DELE te					Change Addition
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STREE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST - ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	et address		
CITY-ST-ZIP			5.4 CITY-			
TITLE		DELETE	61 TITLE		the state of the s	☐ Change ☐ Addition
NAME			6.2 NAME	.		
STREET ADDRESS				ET ADDRESS		
CITY+ST-ZIP			6.4 CITY-	i		
OFFIT OF AIR	i <u>.</u>		9.7 0/17			

14. 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 or an attachment with an address.