

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000014265

FILED
Apr 03, 2003
Secretary of State

Entity Name: F-STAR, INC.

Current Principal Place of Business:

775 SOUTH ST.
MIDDLEBURY, CT 06762 US

New Principal Place of Business:

Current Mailing Address:

13334 POLO CLUB ROAD, #343
WEST PALM BEACH, FL 33414

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINLINE, STEPHEN A
11949 ACME RD
WEST PALM BEACH, FL 33414

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SALVA, GEORGIA
Address: 775 SOUTH STREET
City-St-Zip: MIDDLEBURY, CT 06762

Title: DS () Delete
Name: SALVA, APRIL
Address: 516 MAIN ST N
City-St-Zip: SOUTHURY, CT 06488

Title: DT () Delete
Name: SALVA, ROBERT
Address: 516 MAIN ST N
City-St-Zip: SOUTHURY, CT 06488

Title: D () Delete
Name: SALVA, SKLER
Address: 516 MAIN ST N
City-St-Zip: SOUTHURY, CT 06488

Title: D () Delete
Name: SALVA, FRANK
Address: 775 SOUTH ST
City-St-Zip: MIDDLEBURY, CT 06762

Title: D () Delete
Name: SALVA, TREVAR J
Address: 775 SOUTH ST
City-St-Zip: MIDDLEBURY, CT 06762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGIA SALVA

D

04/03/2003

Electronic Signature of Signing Officer or Director

Date