

2000 UNIFORM BUSINESS REPORT (UBR)

6/13/

FILED

Jul 07, 2000 8:00 am
Secretary of State

06-13-2000 90011 010 ***150.00

DOCUMENT # **PA8000052 183** **R R**
1. Entity Name **Five Star Dream Inc.**

Principal Place of Business Mailing Address
6910 NW 28TH ST
Margate, FL 33063

2. Principal Place of Business Suite, Apt. #, etc.
City & State
Zip Country
6910 NW 28TH ST
Margate FL
33063

4. FEI Number **59-3565814** Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Carl S. Piffer
7447 N.W. 57TH ST
Tamara, FL 33319

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP
President Robert J. Morden 6910 NW 28TH ST, Margate FL 33063
☐ Delete
Agnes E. Morden
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP
V. President Surely Estime
☐ Change ☒ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

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: **Robert J. Morden** (6/1/00) (954) 755-3226
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/99)