

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

AMEND

DOCUMENT # P98000075581

1. Entity Name
7 STAR ENTERPRISES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 SEP -3 PM 4:01

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2135 McKinley Street
Suite, Apt. #, etc.

3. Mailing Address

2135 McKinley Street
Suite, Apt. #, etc.

200007675152--6

09/12/02 01008--011

*****70.00 *****70.00

City & State
Clearwater, Florida

City & State
Clearwater, Florida

4. FEI Number
59-3529796

Applied For
Not Applicable

Zip
33765

Country
U.S.A

Zip
33765

Country
U.S.A

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Michael Spithoyanis

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

2135 McKinley Street

City

Clearwater

FL

Zip Code
33765

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
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	P John A Koymarianos 315 S. Nimbus Avenue #8 Clearwater, FL 33765	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Michael Spithoyanis 2135 McKinley Street Clearwater, FL 33765	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, and all other like empowered.

SIGNATURE:

VICE PRESIDENT

MICHAEL SPITHOYANIS

8-30-2002 (727) 418-9694

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Original Filing #

9/9/02