## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000101833

INFINITY STAR INVESTMENTS, INC.

## **FILED** Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90034 009 \*\*\*150.00



				<del></del>		<b>10   </b>      1
Principal Plac	ce of Business	Mailing Address			,	
60 LINDSEY I		1680 LINDSEY ROAD				
ACKSONVILLE FL 32221		JACKSONVILLE FL 32221		DO NOT WRITE IN TH	IIS SPACE	
				3. Date Incorporated or Qualifed		<u> </u>
				12/08/1998		
Principal Place of Business 3222 2a. Mailing Address		32221	4 EEI Number	A	plied For	
	INDSEN RD. JACKSMUKIC FL.	26 IGGOLINGGENRO, S	ACKS PURCL FL.	59-35-45-218	No	t Applicable
Suite, Apt		Suite, Apt. #, etc.		E Codificate of Status Decised	\$8.75	Additional
22		27		5. Certificate of Status Desired	- Fee Re	quired .
City & State City & S		City & State		6. Election Campaign Financing	\$5.00	May Be
3 JACK	SOM VILLE, FL.	28 JACKGONVKILL	, FL.	Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	<u>~</u>	<b>=6</b> *
4 322	2) 25 USA	29 3222/1 30	USA	Personal Property Tax.	∐ Yes	<b>™</b> No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	ed Agent	
AP. 1	C DICHADO I		81 Name			
	LS, RICHARD L		82 Street Add	Iress (P.O. Box Number is Not Acceptable)		
1660 LINDSEY ROAD JACKSONVILLE FL 32221						
JAU	KSUNVILLE FL 32221		83			
			84 City		. 85 Zip	Code
				poration submits this statement for the purpose		
12	Signature, typed or printed name of registered agent OFFICERS AND		gistered Agent signature require 13.	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE	PSTD OFFICERS AND	DELETE	1.1 TITLE	ADDITIONOS FIZACES TO CITTOERO	☐ Change	Addition
NAME	SELLS, RICHARD L		1.2 NAME			
STREET ADDRESS	JOSS LINDORY DOAD		1.3 STREET ADDRESS	•		
	JACKSONVILLE FL 32221		1.4 CITY-ST-ZIP	-		
TITLE	JACKSONVILLE I E SZZZI	☐ DELETE	2.1 τιπέ		☐ Change	Addition
NAME			2.2 NAME			
STREET ADDRES	e		2.3 STREET ADDRESS			
			2.4 CITY-ST-ZIP	and the second seco	error commence access	~ ·· .
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME		-	3.2 NAME	-		
STREET ADDRES	a		3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME	The second second	-	
STREET ADDRESS	s		4.3 STREET ADDRESS	····		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	<u> </u>				Change	☐ Addition
NAME		☐ DELETE	5.1 TITLE			
STREET ADDRES		☐ DELETE	5.1 TITLE 5.2 NAME			
CITY-ST-ZIP	s	☐ DELETE		~ .		
	s	☐ DELETE	5.2 NAME	• • • • • • • • • • • • • • • • • • • •		
TITLE	s	☐ DELETE	5.2 NAME 5.3 STREET ADDRESS		☐ Change	☐ Addition
TITLE NAME	s		5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			☐ Addition
			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE			Addition

14. 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 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 on an attachment with an address, with all other like empowered.