082500 Papelor 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P99000029180** 1. Entity Name 00 AUG 25 PM 1:57 MAC-STAR CORPORATION SESPETARY OF STATE TABLE MASSES PLORIDA Principal Place of Business Mailing Address 3040 NW 72 AVE 3040 NW 72 AVE MIAMI FL 33122 MIAMI FL 33122 2. Principal Place of Business 3. Mailing Address Mac-Star Corporation lin Road 9516 Gri Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number Cooper FL 65-0935438 Cooper Not Applicable Country Zip Zip \$8.75 Additional 5. Certificate of Status Desired 33328 333.28_ Fee Required :-- --7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SANDRO DE PAULO DE PAULO, SANDRO Street Address (P.O. Box Number is Not Acceptable) 338 FALCON AVE MIAMI SPRINGS FL 33166 Lauderdale Zip Code 33331 8. The above named inity 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. PS TITLE ☐ Change ☐ Addition ☐ Delete TITI F MARTINS, HELENA NAME NAME STREET ADDRESS STREET ADDRESS 338 FALCON AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI SPRINGS FL 33166 800003389858 -09/12/00--01**049**00002020 Addition TITLE Delete TITLE NAME MARTINS, FELIPE NAME ****150.00 a ****150.00 STREET ADDRESS 338 FALCON AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI SPRINGS FL 33166 □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZIP TITLE Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-Z)P CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 addracs, with all other like empowered.

SIGNATURE:

08.18.2000

pageron

MAC-STAR CORPORATION

9516 Griffin Road, Cooper City, FL 33328 Tel: (954) 252-5373 - FAX: (954) 252-8570

August 18th, 2000.

To:
FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. Box: 1500

RE: 2000 Uniform Business Report

Dear Sir(s):

Last week we called Florida Department of State to explain why we did not file by the due date. The person we spoke to, suggested that we should write a letter of explanation. What happened is: our registered agent is out of the country since last April of the current year and we were not aware of the due date of Uniform Business Report. We have been working hard to keep our business open because this is a new company and, besides, we have moved out from one location to another one and, it takes time to make a new customers.

For those reasons, we would like to ask you, please, to give us one time waive. We really appreciate your kind attention.

We are sending a check for 150.00 and, we thank you very much for your understanding.

Truly yours.

Jose Martins

Director