

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90458 026 ***158.00

DOCUMENT # P99000037086

1. Entity Name

TAURUS APARTMENTS STAR II, INC.

Principal Place of Business

Mailing Address

**1400 EAST NEWPORT CENTER DRIVE
 SUITE 209
 BEACH FL 33442**

**1400 EAST NEWPORT CENTER DRIVE
 SUITE 209
 DEERFIELD BEACH FL 33442-7713**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1350 E. Newport Center

PO BOX 4219

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 206

City & State

City & State

Deerfield Beach, FL

Deerfield Beach, FL

Zip

Country

Zip

Country

33442

USA

33442-4219

USA

4. FEI Number

65 0921503

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

**KAY, JAMES R
 777 SOUTH FLAGLER DRIVE
 SUITE 900 EAST TOWER
 WEST PALM BEACH FL 33401**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REIBLING, LORENZ 1400 EAST NEWPORT CENTER DRIVE SUITE 209 DEERFIELD BEACH FL 33442	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REIBLING, GUENTHER 1400 EAST NEWPORT CENTER DRIVE SUITE 209 DEERFIELD BEACH FL 33442	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1350 E. Newport Center Dr. Ste 206 Deerfield Beach, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1350 E. Newport Center Dr. Ste 206 Deerfield Beach, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

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:

Linda G. Kassof
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Linda G. Kassof 4/27/00

Date

Daytime Phone #