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

DOCUMENT #P999000044990

1. Entity Name

5 STAR TRAINING CENTER, INC.

attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

SIGNATURE:



FILED Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90939 005 ***150.00

I	ON.	OT V	VRITI	E IN TI	HIS SP	ACE		•		
2. Principal Place of Business 16400 NE 19 15 Ave				3. Mailing	Address ONE 1	7th Aven	ue			
Suite, Apt. #, etc.					ot. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State	MEA	M1	Beach	74 City & Si NORTH	tate MIAMI	BEACH,	H	4. FEI Number 65-09 2094 §		Applied For Not Applicable
Zip 331	162	Country	l SA	3316		Country SP		5. Certificate of Status Desired		3.75 Additional Required
				en e				7. Name and Address of Currer	nt Registered A	gent
		Marine Service	Agent to the second of the sec			Name		ARLES CANI		
	To the said to		The second secon	VRITE		Street A	ddress (F	O. Box Number is Not Acceptab	Street	
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			The second second			City	J. 1	M . B	FL	Zip Code
8 The above t	named entity	/ submits t	nis statement	for the purpose	of changing its r	e nednata		ed agent, or both, in the State of F		liar with, and accept
the obligation				- O	or origing no r	og.o.o. oa omoo o	.ug.o.o.c	o agong or boun, in and diane or i		mar man, and goods
SIGNATURE		e	ported	www]	CHAR	lës Car	JAOY		4/4	1/03
	Signature, typed	A DESCRIPTION OF THE PARTY OF T	e of registered age	nt and title if applicable	. (NOTE:	Registered Agent signat	ure required v	when reinstating)	DATE	
	uary 1 - Ma After May 1	, Fee is \$	550.00					9. Election Campaign F		\$5.00 May Be
Make Check I	Amended Payable to			of State				Trust Fund Contribution	on. LJ	Added to Fees
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12. I hereby certify that the information supplied with this filling 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 10 or on an attempt with an oddinary with a contraction.