

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S73072

FILED  
Apr 25, 2002 8:00 AM  
Secretary of State

**Entity Name:** FIVE STAR NETWORK AND MANAGEMENT, INC.

## Current Principal Place of Business:

6549 NW 99TH AVE  
PARKLAND, FL 33076 US

## New Principal Place of Business:

940 TRADEWINDS BEND  
WESTON, FL 33327 US

## Current Mailing Address:

6549 NW 99TH AVE  
PARKLAND, FL 33076 US

## New Mailing Address:

940 TRADEWINDS BEND  
WESTON, FL 33327 US

**FEI Number:** 65-0281118

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

PORRAS, MARA  
6549 NW 99TH AVENUE  
PARKLAND, FL 33076

## Name and Address of New Registered Agent:

PORRAS, MARA  
940 TRADEWINDS BEND  
WESTON, FL 33327

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:

04/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: PORRAS, ELIAS,  
Address: 6549 NW 99TH AVE  
City-St-Zip: PARKLAND, FL 33076

Title: D ( ) Delete  
Name: PORRAS, ELIAS,  
Address: 6549 NW 99TH AVE  
City-St-Zip: PARKLAND, FL 33076

Title: VPD ( ) Delete  
Name: PORRAS, ELIAS  
Address: 6549 NW 99TH AVE  
City-St-Zip: PARKLAND, FL 33076

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: PORRAS, ELIAS,  
Address: 940 TRADEWINDS BEND  
City-St-Zip: WESTON, FL 33327

Title: D (X) Change ( ) Addition  
Name: PORRAS, ELIAS  
Address: 940 TRADEWINDS BEND  
City-St-Zip: WESTON, FL 33327

Title: VPD (X) Change ( ) Addition  
Name: PORRAS, ELIAS  
Address: 940 TRADEWINDS BEND  
City-St-Zip: WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIAS PORRAS

PRES

04/25/2002

Electronic Signature of Signing Officer or Director

Date