

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

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90348 016 ***158.75

DOCUMENT # S75494

1. Entity Name

Seven Star Management, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6697 S. Military Trail

Suite, Apt. #, etc.

3. Mailing Address

2800 Weston Rd

Suite, Apt. #, etc.

Suite 201

City & State

Lakeworth, FL

City & State

Weston, FL

4. FEI Number

650278561

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Andrew L. Siegel

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

2800 Weston Road

Weston

City

Weston,

FL

Zip Code

33331

**DO NOT WRITE
IN THIS SPACE**

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

Andrew L. Siegel

7-11-02

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	James D. Prosen	2120 Canter Way	Wellington, FL

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

James Prosen

James Prosen

7/9/02

(561) 965-3106

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Original Phone #

CR2E034B (12/01)