


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2007 8:00 am**  
**Secretary of State**

04-26-2007 90179 029 \*\*\*150.00

**DOCUMENT # P02000038996**


1. Entity Name  
**BON-STAR INTERNATIONAL, INC.**



Principal Place of Business <b>2167 5TH AVENUE NORTH ST. PETERSBURG, FL 33713</b>	Mailing Address <b>2167 5TH AVENUE NORTH ST. PETERSBURG, FL 33713</b>
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40001000



03072007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>01-0659712</b>	Applied For
<b>NOT APPLICABLE</b>	Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**KNAUST, WARREN J  
2167 5TH AVENUE NORTH  
ST. PETERSBURG, FL 33713**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST NIKOLIC, BOB 2167 5TH AVENUE NORTH ST. PETERSBURG, FL 33713
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Bob Nikolic **BOB NIKOLIC** APR 17. 07 (727) 847-5713  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #