


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 03, 2005 08:00 AM**  
**Secretary of State**


**DOCUMENT # P95000091444**

1. Entity Name  
**DAYSTAR SYSTEMS, INC.**



Principal Place of Business <b>488 W HIGHBANKS RD          DEBARY, FL 32713 US</b>	Mailing Address <b>488 W HIGHBANKS RD          HEINIGER - UNIT 107          DEBARY, FL 32713 US</b>
---	--

**DO NOT WRITE IN THIS SPACE**



01072005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3350284</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**HEINIGER, JAMES L  
 488 W HIGHBANKS RD  
 HEINIGER - UNIT 107  
 DEBARY, FL 32713**

**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)

<b>FILE NOW!!! FEE IS \$150.00        After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>100000368967        06/03/05-80005-008 150.00</b>
--	---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO          SANFORD, DAVID L          2402 JEFFERSON CT          SANFORD, FL 32771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D          SANFORD, DAVID          2402 JEFFERSON CT          SANFORD, FL 32771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSTD          HEINIGER, JAMES L          488 W HIGHBANKS RD          DEBARY, FL 32713</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

*STW  
 6.1.05 CHECK NOT CASHED  
 CALLED 850-295-6056 #4  
 KRISTEN - NOT RUD IT - SEND AGAIN  
 W/LETTER & NEW CHECK,*

**DO NOT WRITE IN THIS SPACE**

*CH 3442  
 6.1.05  
 \$150.00*

*CH 3430  
 150.00  
 3.25.05*

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *James L Heiniger* **JAMES L HEINIGER** 3.25.05 407-302-9199

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #