

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**May 28 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000001769 (4)
1. Corporation Name
OCEAN STAR, INC.



Principal Place of Business 407 LINCOLN RD. 10F MIAMI BCH FL 33139 US	Mailing Address 160 SW 12 AVENUE SUITE 101-B DEERFIELD BEACH FL 33442
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26 P.O. Box 403022
22 Suite, Apt #, etc.	27 Suite, Apt #, etc.
23 City & State	28 Miami BEACH, FL
24 Zip	29 33140-3022
25 Country	30 Dade

3. Date Incorporated or Qualified 01/05/1996	
4. FEI Number 65-0648362	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**SANTORO, GIULIO
407 LINCOLN RD.
SUITE 10-F
MIAMI BCH FL 33139**

81 Name WAYNE PATHMAN	
82 Street Address (P.O. Box Number is Not Acceptable) TWO SOUTH BISCAYNE BOULEVARD	
83 SUITE 3660	
84 City MIAMI	85 Zip Code FL 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1108, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Signature of Wayne Pathman)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DPS	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SANTORO, GIULIO R		1.2 NAME	DPS
STREET ADDRESS 407 LINCOLN ROAD, 10F		1.3 STREET ADDRESS	RUGGERI PIER LUIGI
CITY-ST-ZIP MIAMI BEACH FL		1.4 CITY-ST-ZIP	Via Ruvigliana 23
TITLE VPT	<input type="checkbox"/> DELETE	2.1 TITLE	LUGANO=VIGANELLO Switzerland
NAME RUGGERI, PIER LUIGI		2.2 NAME	
STREET ADDRESS VIA RUVIGLIANA 23		2.3 STREET ADDRESS	
CITY-ST-ZIP LUGANO-VIGANELLO SW		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this 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 person authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet with an arrow.

SIGNATURE _____ DATE _____
(Signature of Pier Luigi Ruggeri)

CR2E034 (10/97)