

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

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90149 032 ***150.00

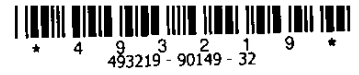


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

PROFIT CORPORATION
ANNUAL REPORT
1999

DOCUMENT # P 98 00000 6760 ✓

1. Corporation Name
DAYSTAR yachts, Inc.



Principal Place of Business Mailing Address
~~4933 HAWSER LANE~~ ~~490 HAWSER LANE~~
4933 N TAMIAH TR. 4933 N TAMIAH TR.
NAPLES FL 34103 NAPLES FL 34102-5078

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01-22-98

2. Principal Place of Business 2a. Mailing Address
21 390 HAWSER LANE 26 390 HAWSER LANE
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 _____ 27 _____
City & State City & State
23 NAPLES FL 28 NAPLES FL
Zip Country Zip Country
24 34102 25 _____ 29 34102 30 _____

4. FEI Number Applied For
59-3488775 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
ANN T. FRANK
2124 AIRPORT Rd So STE 102
NAPLES FL 34112

10. Name and Address of New Registered Agent
81 Name JOSEPH W. HART
82 Street Address (P.O. Box Number is Not Acceptable)
390 HAWSER LANE
83 _____
84 City NAPLES FL 85 Zip Code 34102

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 Joseph W. Hart H-5-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input type="checkbox"/> DELETE	JOSEPH W. HART	390 HAWSER LANE	NAPLES FL 34102
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition	PRESIDENT	JOSEPH W. HART	390 HAWSER LANE
			NAPLES FL 34102
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph W. Hart H-5-99 9412621897
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)