2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # **P99000059149** May 05, 2000 8:00 am Secretary of State 1. Entity Name "DAYSTAR TELECOM, INC." 05-05-2000 90071 020 ***158.75 Mailing Address Principal Place of Business **600 SOUTH DIXIE HIGHWAY** 600 SOUTH DIXIE HIGHWAY SUITE 210 SUITE 210 **BOCA RATON FL 33432 BOCA RATON FL 33432-6034** 2. Principal Place of Business 3. Mailing Address 1816 S.W. 7th Avenue 1816 S.W. 7th Ave. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 65-0937002 Pompano Beach , Florida Pompano Beach, Florida Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33060 33060 Fee Required-7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PRUDEN. JAMES L ESQ. Street Address (P.O. Box Number is Not Acceptable) 370 WEST CAMINO GARDENS BLVD. SUITE 210 **BICA RATIB FL 33432** Zip Code 32 Boca Raton Boca Raton, FL 33432 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. James Pruden, Esq. SIGNATURE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. President, Treasurer X Delete TITLE X Change ☐ Addition TITLE DRAXL, KURT Paul Mortilla NAME NAME 600 SOUTH DIXIE HIGHWAY, SUITE 210 1816 S.W. 7th Avenue STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** CITY-ST-ZIP CITY-ST-ZIP Pompano Beach, FL 33060 Addition TITLE ☐ Change ☐ Delete TITLE Secretary NAME John Leta STREET ADDRESS STREET ADDRESS 1816 S.W. 7th Avenue CITY-ST-ZIP CITY-ST-ZIP Pompano Beach, FL 33060 ☐ Addition ☐ Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C!TY-ST-ZIP 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 Block 12 if changed, or on an attachment with an address, with all other like impowered.