| COF  | E NOW: FILING FEE PROFIT RPORATION JAL REPORT 1996  | FLORIDA DE<br>Sand<br>Seci   | PARTMENT OF STATE ra B. Mortham eletary of State  OF CORPORATIONS |   |   |
|--|---|--|---|---|---|
| DOCU<br>1. Corporatio  | MENT # 64938  | 32 (9)   |   |   |   |
| THE T  | TRI-STAR GROUP, INC.  |  |   | I ISSUE BUILD BUILD BUILD BUILD BUILD BUILD   |   |
| Principal Place  | e of Business   | Mailing Address  |   |   |   |
| 510 S. HIGHLAND AVE CLEARWATER FL 34616 US  C/O BOERNER 510 S. HIGHLAND AVE CLEARWATER FL 34616 US |   |  | ·v=   | Date Incorporated or Qualified  |   |
| 9 Principal Di   | ace of Business   | (, "   |   | 12/26/1979  | 04/11/1995  |
| 21   | ace or business   | 28 POBOX   | 70  | 4. FEI Number 59-1971785  | Applied For   |
| Suite, Apt.  | #, etc.   | Suite, Apt. #, etc.  |   | 5. Certificate of Status Desired  | Not Applicable \$8.75 Additional                                      |
| City & State   | 9   | City & State   | DRINES IL   | 6. Election Campaign Financing  | Fee Required  \$5.00 May Re   |
| Zip  | Country   | 28 / /KCP 0/0 3  | Country   | <ul><li>Trust Fund Contribution</li><li>8. This corporation has liability for</li></ul>   | Added to Fees   |
| 24   | 25<br>9. Name and Address of Curre  | 29 34638-  | 30 VIA  |   | No  |
| 101 W.<br>TARPON<br>11. Pursuant t<br>or register<br>familiar wit                                  | RRY PRIOR<br>LEMON STREET<br>N SPRINGS FL 34689<br>o the provisions of Sections 607,050;<br>ed agent, or both, in the State of Flor<br>th, and accept the obligations of, Section | 2 and 607.1508, Florida Statu<br>ida. Such change was author<br>tion 607.0505, Florida Statute | 83  <br>84   City   | dress (P.O. Box Number is Not Acceptable of the purporation submits this statement for the purporard of directors. I hereby accept the appx | 85 Zip Code   |
| SIGNATURE  | Signature, typed or printed han e of registered agen  | t and title if applicable (N   | IOTE: Rogistered Agent signature requi                            | ired when reinstating   | DATE  |
| 12.  |   | D DIRECTORS  | 13.   | ADDITIONS/CHANGES TO OFFI   |   |
| TITLE<br>NAME  | P<br>Boerner, Henry   | DELETE   | 1. 1 TITLE  |   | ·   |
| STREET ADDRESS   | C/O PRIOR 101 W. LEMON :  | ST.  | 12 NAME<br>1.3 STREET ADDRESS                                     |   | Channe  |
| C()Y-ST-ZIF<br>TI'LE   | TARPON SPRINGS FL<br>V  | Parine   | 1.4 CITY - ST - ZIP   |   |   |
| NAME   | PIROR, HARRY  | DETE LE  | 2. 1 TITLE<br>2.2 NAME  |   | Change Addition   |
| STREET ADDRESS   | 101 W. LEMON ST.  |  | 2.3 STREET ADDRESS  |   |   |
| CITY-ST-ZIP<br>TITLE   | TARPON SPRINGS FL 34689   |  | 2.4 CITY - ST - 7IP   |   |   |
| NAME   |   | ☐ DELETE   | 3. 1 TITLE  | ·   | Change Addition   |
| STREET ADDRESS   |   |  | 3.2 NAME<br>3.3 STREET ADORESS                                    |   |   |
| CITY - ST - ZIF  |   |  | 3 4 CITY-ST-ZIP   |   |   |
| TITLE  |   | ☐ DELETE   | 4. 1 TITLE  |   | Change Addition   |
| NAME<br>STOLET ADODESS   |   |  | . 42 NAME   |   |   |
| STREET ADDRESS<br>CITY-ST-ZIF  |   |  | 43 STREET ADDRESS   | 700001.00   | <br> <br>  なのつつ   |
| TITLE  | ***************************************   | DELETE   | 4.4 CHY-ST-ZIP<br>5. 1 TITLE                                      | 70000183<br>  | 19-1000 D Addition  |
| NAME   |   |  | 5.2 NAME  | ***208.75   | 13 OppChange Addition   |
| STREET ADDRESS   |   |  | 5.3 STREET ADDRESS  |   | $\sim$ |
| CITY - ST - ZIP  |   | P-1  | 5.4 CITY - ST - ZIP   |   |   |
| TITLE  |   | DELETE   | 6. 1 TIPLE  |   | Change  Addition  |
| NAME   |   |  | 6.2 NAME  |   |   |

6 4 CITY- \$1-2IP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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.

6.3 STREET ADDRESS

SIGNATURE: ...

STREET ADDRESS

CHTY-ST-ZIP

LBOPANER FLER ON DIRECTOR

873 943~0321 Dayline Proce #