

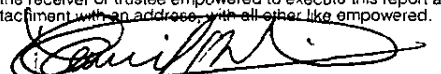


**FILED**  
**Jul 22, 2008 08:00 AM**  
**Secretary of State**

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # F06000006869</b>		
1. Entity Name <b>TRISTAR FINANCIAL GROUP, INC.</b>		
Principal Place of Business <b>18653 VENTURA BLVD SUITE 333 TARZANA, CA 91356</b>	Mailing Address <b>18653 VENTURA BLVD SUITE 333 TARZANA, CA 91356</b>	  07162008    No Chg-P    CR2E034 (11/05)
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>PENUEL, WILLIAM R 1655 THE GREENS WAY #3211 JACKSONVILLE BEACH, FL 32250</b>		4. FEI Number <b>37-1513522</b>
<b>DO NOT WRITE IN THIS SPACE</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
		Applied For Not Applicable
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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
10. OFFICERS AND DIRECTORS		<div style="margin-bottom: 20px;">U00000955842 07/22/08-80009-003 150.00</div> <b>DO NOT WRITE IN THIS SPACE</b>
TITLE	CP	
NAME	KASHANI, DANIEL	
STREET ADDRESS	18653 VENTURA BLVD., SUITE 333	
CITY - ST - ZIP	TARZANA, CA 91356	
TITLE	T	
NAME	KASHANI, DANIEL	
STREET ADDRESS	18653 VENTURA BLVD., SUITE 333	
CITY - ST - ZIP	TARZANA, CA 91356	
TITLE	S	
NAME	KASHANI, DANIEL	
STREET ADDRESS	18653 VENTURA BLVD., SUITE 333	
CITY - ST - ZIP	TARZANA, CA 91356	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  <b>Daniel Kashani</b> 7/16/08    818-899-4458		