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Mailing Address

P.O. BOX 195785

WINTER SPRINGS FL 32719-5785

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400005884 (1)

SIMSTAR INC.

Principal Place of Business

880 E STATE ROAD 434

US

WINTER SPRINGS FL 32708

11/15/1994 04/15/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For SAME 400 NORTH 63-1090371 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for in angible tax under s. 199.032, U.5.A Yes 🔲 No Florida Statutes 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STARK, HELEN 680 E. STATE ROAD 434 82 Street Address (P.O. Box Number is Not Acceptable) WINTER SPRINGS FL 32708 83 Zip Code 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. (NOTE, Registered Agent signature required when reinstating) OFFICIARS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) Addition TITLE D DELETE 1 1 TITLE Change NAME SIMERLY, WENDELL 1.2 NAME CR2E034 2216 BURGUNDY DR 1.3 STREET ADDRESS STREET ADDRESS CARROLLTON TX 1.4 CITY - ST - ZIP CITY-S1-712 DELETE Change Addition TITLE 21 TITLE SIMERLY, EURETHA 22 NAME 2216 BURGUNDY DR STREET ADDRESS 2.3 STREET ADDRESS CAARROLLTON TX CITY - \$1 - 71P 2.4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE NAME Stark, Helen 3 2 NAME 680 E. STATE ROAD #434 STREET ADDRESS 3.3 STREET ADDRESS WINTER SPRINGS FL CITY: ST: ZIP 3.4. City - ST-ZIP DELETE Change ___ Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS City-SI-7/2 5.4 CITY - ST - ZIP DELETE Change Addition TIME 6.1 TITLE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP CITY S1 209 14. I do 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 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.

sytime Phone #

FILED

Jan 23 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified