

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

FILED  
Jun 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000004614 (1)

1. Corporation Name

FIVE STAR EXPORTS, Inc.  
DIBA SITARA COMPUTER SUPPLIES, Inc.

Principal Place of Business

Mailing Address

815 N.W. 57th Ave #45 815 N.W. 57th Ave #145  
Miami, FL 33126 Miami, FL 33126

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/96

4. FEI Number

65-0698841

Applied For

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 815 N.W. 57th Ave

Suite, Apt. #, etc.

22 145

City & State

23 Miami, FL

Zip

24 33126

Country

25 USA

2a. Mailing Address

26 815 N.W. 57th Ave

Suite, Apt. #, etc.

27 145

City & State

28 Miami, FL

Zip

29 33126

30 USA

9. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, Inc.  
1406 HAYS ST. #2  
TALLAHASSEE, FL 32301

10. Name and Address of New Registered Agent

81 Name

82 UGO CHIARATO

83 Street Address (P.O. Box Number is Not Acceptable)

220 71st STREET

84 # 213

City

MIAMI BEACH

FL

85 Zip Code

33141

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

Signature typed or printed name of registered agent and the date (Note: Registered Agent signature required when reinstating)

Ugo Chiarato

04/28/98

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE  
NAME KARIM JAMAL  
STREET ADDRESS 105 DUMFRIES TOWN OF N. ROYAL  
CITY-ST-ZIP QUEBEC, CANADA H3P 2R8

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

400002577934

-07/01/98--01054--043

\*\*\*158.75

AR 4/30

14. I hereby certify that the information supplied with this form 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 registered agent, or both, and I am 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 to this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/28/98 (305) 261-1587

CR2E034 (10/97)