


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

FILED

Jun 01 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # H91233 (7)</b> 1. Corporation Name <b>CERASARO SILVERSTAR, INC.</b>			
Principal Place of Business <b>2771-20 MONUMENT RD JACKSONVILLE FL 32225 US</b>		Mailing Address <b>2771-20 MONUMENT RD. JACKSONVILLE FL 32225 US</b>	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Name and Address of Current Registered Agent <b>CERASARO, JOHN PETER 3902 HEIDI ROAD, WEST JACKSONVILLE FL 32211</b>		3. Date Incorporated or Qualified <b>12/23/1985</b> 4. FEI Number <b>59-2612993</b> 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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: <i>John Peter Cerasaro</i> <b>JOHN PETER CERASARO</b> 5/26/98 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP DT CERASARO, JOHN PETER 3902 HEIDI ROAD, W. JACKSONVILLE FL DVP CERASARO, GEORGE ANTHONY 1752 CHANDLER CIRCLE WEST JACKSONVILLE FL DP CERASARO, JON HUNTER 4774 TOCOBAGA LANE JACKSONVILLE FL DS CERASARO, ALICE WEBER 3902 HEIDI ROAD, W. JACKSONVILLE FL		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
14. 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 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 completed, or on an attachment with an address. SIGNATURE: <i>George A. Cerasaro</i> <b>GEORGE A. CERASARO</b> 5/27/98 904-505-9091			



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)