

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J20485

**FILED**  
**Mar 30, 2004**  
**Secretary of State**

**Entity Name:** DAYSTAR PRODUCTIONS, INC.

**Current Principal Place of Business:**

1001 NW 89 TERR.  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

1001 NW 89 TERR.  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:** 59-2694799      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BULLMAN, ROGER LEWIS  
1001 NW 89 TERR.  
PEMBROKE PINES, FL 33024

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BULLMAN, ROGER LEWIS,  
Address: 1001 NW 89 TERR.  
City-St-Zip: PEMBROKE PINES, FL

Title: STD ( ) Delete  
Name: BULLMAN, ALICIA ESTH, ER  
Address: 1001 NW 89 TERR.  
City-St-Zip: PEMBROKE PINES, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER LEWIS BULLMAN

PD

03/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date