2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 21, 2001 8:00 am Secretary of State **DOCUMENT # K61762** 1. Entity Name TR*STAR, INC. 02-21-2001 90010 020 ***150.00 Principal Place of Business Mailing Address 501 E. KENNEDY BLVD. 501 E. KENNEDY BLVD. **SUITE 1207 SHITE 1207 TAMPA FL 33602 TAMPA FL 33602** 2. Principal Place of Business 3. Mailing Address 2556 Brandy Run Dr. 2556 Brandy Run Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 87-0427671 Not Applicable Salem, Sa<u>lem, VA</u> Country Country \$8.75 Additional 5. Certificate of Status Desired 24153 USA 24153 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent. Name PADGETT, STANLEY T. Street Address (P.O. Box Number is Not Acceptable) 501 EAST KENNEDY BLVD. **SUITE 1207 TAMPA FL 33602** Zip Code City FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) Delete Change ☐ Addition TITLE TITLE D TRENT, LARRY WILLIAM NAME NAME TRENT, LARRY WILLIAM 1731 SHADY LEAF DRIVE STREET ADDRESS STREET ADDRESS 2556 BRANDY RUN DRIVE CITY-ST-ZIP VALRICO FL CITY-ST-ZIP SALEM, VA 24153 ☐ Addition Delete TITLE **Change** TITLE TRENT, MAYETTA JOYCE NAME NAME TRENT, MAYETTA JOYCE 1731 SHADY LEAF DRIVE STREET ADDRESS STREET ADDRESS 2556 BRANDY RUN DRIVE VALRICO FL CITY-ST-7/P CITY-ST-ZIP LEM, VA 24153 TITLE ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Larry W. Trent 02/14/01 540-387-0013 SIGNATURE: ACCUATION AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # Date