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Apr 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L83759

(5)

1. Corporation Name

POWERSTAR ELECTRONICS INC.

Principal Place of Business

430 E SEMORAN BLVD
SUITE E208
CASSELBERRY FL 32707
US

Mailing Address

P O BOX 3580
WINTER SPRINGS FL 32708-0580
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

06/28/1990

3a. Date of Last Report

04/18/1996

4. FEI Number

59-3018486

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 has liability for intangible tax under s. 199.032,
Florida Statutes

X Yes ☐ No

9. Name and Address of Current Registered Agent

DOWERS, MARION
1119 ERMINE AVE
WINTERSPRINGS FL 32708

10. Name and Address of New Registered Agent

81 Name Powers, Marion
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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.

SIGNATURE

Signature of registered agent (print name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

3-7-97

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	POWERS, MARION M.	1119 ERMINE AVE	WINTER SPRINGS FL	☐
D	POWERS, CHARLES M. SR.	1119 ERMINE AVE	WINTER SPRINGS FL	☐
D	POWERS, CHARLES M. JR.	1119 ERMINE AVE	WINTER SPRINGS FL	☐
D				☐
D				☐
D				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
1.1	1.2	1.3	1.4	☐	☐	☐
2.1	2.2	2.3	2.4	☐	☐	☐
3.1	3.2	3.3	3.4	☐	☐	☐
4.1	4.2	4.3	4.4	☐	☐	☐
5.1	5.2	5.3	5.4	☐	☐	☐
6.1	6.2	6.3	6.4	☐	☐	☐

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.

SIGNATURE: Marion M. Powers 3-7-97 331-7771

CR2E034 (9/96)