SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998, **FILED** AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Jul 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **19**98 DIVISION OF CORPORATIONS DOCUMENT # L85161 (2)1. Corporation Name PENSTAR, INC. Principal Place of Business Malling Address % T. NEJAT VEZIROGLU % T. NEJAT VEZIROGLU 4910 BILTMORE DR 4910 BILTMORE DR **CORAL GABLES FL 33146 CORAL GABLES FL 33146** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/11/1990 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0205158 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ___ Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VEZIROGLU. T. NEJAT 4910 BILTMORE DR 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33146 83 84 City Zip Code 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, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 11 TITLE Change **VEZIROGLU, T. NEJAT** NAME 1.2 NAME 4910 BILTMORE DR STREET ADDRESS 1.3 STREET ADDRESS **CORAL GABLES FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE Change Addition VEZIROGLU, BENGI NAME 2.2 NAME **4910 BILTMORE DR** STREET ADDRESS 2.3 STREET ADDRESS **CORAL GABLES FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 3.1 TITLE DELETE ___ Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-\$T-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 5.1 TITLE TITLE DELETE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE ___ DELETE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS 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 angual 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. 22 July 1998

(30x) 284 - AGCC