2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M50391

1. Entity Name ALLSTAR INDUSTRIES, INC.



Principal Place of Business

7001 W 20 AVE HIAHLEAH, FL 33014 Mailing Address

7001 W 20 AVE HIAHLEAH, FL 33014

FILED Apr 30, 2004 8:00 am Secretary of State

04-30-2004 90371 043 ***150.00

44042308



04192004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1224676

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZEINFELD, PAUL 15610 BULL RUN RD #518 MIAMI LAKES, FL 33014

- <u>*</u>				IIN	I IIIS SPACE	
	named entity submits this statement for the plants of registered agent.	surpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am famil	iar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registere	d Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP ZEINFELD, PAUL 7023 GREENTREE LANE MIAMI LAKES, FL	CTORS	_			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/21/04

305 823 4837

Daytime Phone #