2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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Secretary of State **DOCUMENT # P01000022367** 03-29-2006 90124 024 ***150.00 STARDUSTERS WORKSHOP ENTERPRISES, INC. Principal Place of Business Mailing Address 887 PATTERSON DRIVE 887 PATTERSON DRIVE SARASOTA, FL 34234 SARASOTA, FL 34234 3. Mailing Address 2. Principal Place of Business Illl Ninth Avenue West 1111 Ninth Avenue West Suite, Apt. #, etc. Suite, Apt. #, etc 03242006 CR2E034 (11/05) Chg-P Suite B Suite B City & State City & State 4. FEI Number Applied For Bradenton, Florida 83-0347092 Bradenton, Florida Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 34205 USA 34205 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DONALD W. YETTER, PA DIFFATTE, SUSAN K Street Address (P.O. Box Number is Not Acceptable) 887 PATTERSON DRIVE SARASOTA, FL 34234 Suite B Bradenton, 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. I am familiar with, and accept the obligations of registered agent. DONALD W. YETTER SIGNATURE. of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. PTD ☐ Delete **X**Change Addition TITLE TITLE P/ T / D NAME DIFFATTE, SUSAN K MARIF SUSAN K. DIFFATTE 887 PETTERSON DR STREET ADDRESS STREET ADDRESS 2465 Kensington Greens Drive SARASOTA, FL 34234 CITY-ST-ZIP CITY-ST-ZIP Sun City Center, Florida 33573 Change VD ☐ Addition TITLE ☐ Delete TITLE YETTER, DONALD NAME NAME STREET ADDRESS STREET ADDRESS 1111 9TH AVE., WEST, SUITE B CITY-ST-ZIP BRADENTON, FL 34205 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE JOHNSON, STEVEN NAME NAME STREET ADDRESS 988 BOULEVARD OF THE ARTS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA, FL 34236 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

FILED Mar 29, 2006 8:00 am