

5/21

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jun 19, 2002 8:00 am
Secretary of State

05-21-2002 90858 003 ***150.00

DOCUMENT # P01000053882

1. Entity Name

GOLDSTAR TECHNOLOGIES, INC.

Principal Place of Business

**7746 SUGAR BEND DR.
ORLANDO FL 32819**

Mailing Address

**7746 SUGAR BEND DR.
ORLANDO FL 32819**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3730426

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PATEL, ARUN
7746 SUGAR BEND DR.
ORLANDO FL 32819**

7. Name and Address of New Registered Agent

Name

Patel, Arun

Street Address (P.O. Box Number is Not Acceptable)

6675 Westwood Blvd.**Suite 100**

City

Orlando**FL**

Zip Code

32821

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution.. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PATEL, ARVIND 7746 SUGAR BEND DR. ORLANDO FL 32819 | <input type="checkbox"/> Delete |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | b Patel, Arvind 6675 Westwood Blvd., Suite 100 Orlando, FL 32821 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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CR2034 (9/01)

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.

SIGNATURE:

SIGNATURE REQUIRED
Arvind Patel**4/29/02 407 226 3280**

Date

Daytime Phone #