2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 13, 2007 8:00 am Secretary of State DOCUMENT # P02000002520 02-13-2007 90047 036 ***150.00 SOUTHERN STAR FASTENERS CO., INC. Principal Place of Business Mailing Address 40016215 4400 HUNTING TRAIL 4400 HUNTING TRAIL LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01162007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 01-0551290 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ERNST, MILLY Street Addr 4400 HUNTING TRAIL LAKE WORTH, FL 33467 City 8. The above named entity su this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. with, and accep the obligations of regist SIGNATURE_______Signature, typed o applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ΡD TITLE Delete TITLE Change ☐ Addition ERNST, MILLY NAME NAME 4400 Hunting STREET ADDRESS 4400 HUNTING TRAIL STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete RHE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IME Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP bl with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information port 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 properties that I am an officer or director properties to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information s indicated on this report or supply of the corporation or the receiver changed, or on an attachment w SIGNATURE:

FILED

Daytime Phone #