2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 05, 2008 08:00 Al te

DOCUMENT # P02000018203 1. Entity Name UPSTAR, INC. Principal Place of Business Mailing Address				Šecrétary of Star	
5405 SE 12 STARKE, FL	16TH STREET 32091	5405 SE 126TH STREET STARKE, FL 32091		! 	88 88 1 1 1 1 1 1 1 1 1 1 1 1
5 de 1				04292008 No Chg-P	CR2E034 (11/05)
C	OO NOT WRITE	IN THIS SPA	CE	4. FEI Number 01-0592738	Applied For Not Applicable
	•			5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent RICKS, JAMES D RR 6 BOX 1487-A STARKE, FL 32091				DO NOT VIN THIS S	PACE
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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fig. 1.				00 May Be ed to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DI D RICKS, JAMES D RR 6 BOX 1487-A STARKE, FL 32091	RECTORS			
NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT V	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS S	PACE
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12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Junes Daniel Pich TAMES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-08 352253-1189

Daytime Phone #

Date