2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000038996

1. Entity Name

BON-STAR INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

2167 5TH AVENUE NORTH ST. PETERSBURG, FL 33713

2167 5TH AVENUE NORTH ST. PETERSBURG, FL 33713

FILED Jan 23, 2006 8:00 am Secretary of State

01-23-2006 90099 012 ***150.00



DO NOT WRITE IN THIS SPACE

01042006 No Chg-P

CR2E034 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KNAUST, WARREN J 2167 5TH AVENUE NORTH ST. PETERSBURG, FL 33713

DO NOT WRITE IN THIS SPACE

		il			
8. The above the obligat	named entity submits this statement for the plions of registered agent.	ourpose of changing its registered o	ffice or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title:	tagalaghla (AIOTE Basis)		e required when reinstating)	DATE
-	Signature, typed of printed harne of registered agent and the	applicable. (NOTE: Registered Age	nı şignaturi	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	· 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADORESS CITY-S1-ZIP TITLE	DPST NIKOLIC, BOB 2167 5TH AVENUE NORTH ST. PETERSBURG, FL 33713	1			
NAME STREET ADDRESS CITY-ST-ZIP		1			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE	I				

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:

NAME STREET ADDRESS CITY-ST-ZIP

B. Naley -

BOB NIKOLIC

714.8 06 (727) 847-5713

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