2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082171

Title:

Name: Address:

City-St-Zip:

TAYLOR, LISA JOHNS

8164 SHADOW PINE WAY SARASOTA, FL 34238

Entity Name: ALL-STAR EQUIPMENT OF MANASOTA, INC.

FILED Jan 10, 2012 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|---|---|---------------------------------|------------------------------------|--------------------------------------|
| | O AVENUE EAS ON, FL 34203 | T | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | O AVENUE EAS ON, FL 34203 | T | | |
| FEI Number: 54-2065406 | | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | |
| 8164 SHÁI | JEFFERY SCO DOW PINE WA A, FL 34238 | Υ | | |
| | named entity s of Florida. | ubmits this statement for the p | ourpose of changing its registered | office or registered agent, or both, |
| SIGNATUF | RE: | | | |
| | Electron | c Signature of Registered Age | ent | Date |
| office D | S AND DIDEO | IODO. | | |
| OFFICERS | S AND DIRECT | ORS: | | |
| Title: Name: Address: Citv-St-Zip: | P J. SCOTT TAYL 8164 SHADOW SARASOTA, FL | PINE WAY | | |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: J. SCOTT TAYLOR PRES 01/10/2012