2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110306

Entity Name: SUN STAR DIE-CAST, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 20533 BISCAYNE BLVD SUITE 477 AVENTURE, FL 33180 **Current Mailing Address: New Mailing Address:** 20533 BISCAYNE BLVD SUITE 477 AVENTURE, FL 33180 US FEI Number: 68-0525719 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: HO KA YUEN, MARGARET 20533 BISCAYNE BLVD SUITE 477 AVENTURE, FL 33180 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HO KA YUEN, MARGARET Name: Name: 20533 BISCAYNE BLVD, SUITE 477 Address: Address: City-St-Zip: AVENTURE, FL 33180 US City-St-Zip: PD Title: Title: () Delete () Change () Addition Name: UN HEONG, IENG Name: 20533 BISCAYNE BLVD, SUITE 477 Address: Address: AVENTURE, FL 33180 City-St-Zip: City-St-Zip: Title: Title: TD () Delete () Change () Addition LEI IOK, KAN Name: Name: 20533 BISCAYNE BLVD, SUITE 477 Address: Address: City-St-Zip: AVENTURE, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition OUJEVOLK, MAURICE Name: Name: Address: 20533 BISCAYNE BLVD, SUITE 477 Address: City-St-Zip: AVENTURE, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition UN HEONG, KEI Name: Name: 20533 BISCAYNE BLVD, SUITE 477 Address: Address: City-St-Zip: AVENTUTE, FL 33180 City-St-Zip: () Delete Title: Title: () Change () Addition Name: UN LEI, CHUN Name: 20533 BISCAYNE BLVD, SUITE 477 Address: Address: City-St-Zip: City-St-Zip: AVENTURE, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: UN LEI CHUN D 04/24/2009