

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000014685

Entity Name: ALL STAR TEXTURE, INC

FILED
Jun 08, 2007
Secretary of State

Current Principal Place of Business:

2613 WILSON CIRCLE
LUTZ, FL 33548

New Principal Place of Business:

Current Mailing Address:

2613 WILSON CIRCLE
LUTZ, FL 33548

New Mailing Address:

FEI Number: 20-0612332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, STEVEN W
2613 WILSON CIRCLE
LUTZ, FL 33548 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MASON, MICHAEL
Address: 2613 WILSON CIRCLE
City-St-Zip: LUTZ, FL 33548

Title: VP () Delete
Name: BAKER, GARRETT
Address: 2613 WILSON CIRCLE
City-St-Zip: LUTZ, FL 33548

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BENKE, MICHAEL
Address: 2613 WILSON CIRCLE
City-St-Zip: LUTZ, FL 33548

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: STEWART, JAMIE
Address: 2613 WILSON CIRCLE
City-St-Zip: LUTZ, FL 33548

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: MIKE BENKE

P

06/08/2007

Electronic Signature of Signing Officer or Director

Date