


**FILED**  
**Aug 02, 2005 8:00 am**  
**Secretary of State**

07-05-2005 90223 040 \*\*\*150.00  
 08-02-2005 90029 034 \*\*\*400.00

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P04000138113			
1. Entity Name WESTSTAR CAPITAL, INC.			
Principal Place of Business 2570 FOREST HILL BLVD #103 W PALM BEACH, FL 33406		Mailing Address 2570 FOREST HILL BLVD #103 W PALM BEACH, FL 33406	
2. Principal Place of Business		3. Mailing Address <i>200110th ELL 183 MADISON AVE</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>SUITE 715</i>	
City & State		City & State <i>NEW YORK NY</i>	
Zip	Country	Zip	Country
		<i>10016</i>	<i>NY</i>
4. FEI Number <i>27-0107671</i>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARSON, WAYNE 2570 FOREST HILL BLVD #103 W PALM BEACH, FL 33406		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when releasing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS ANSON, RICHARD 2570 FOREST HILL BLVD #103 W PALM BEACH, FL 33406 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Wayne Carson</i>		<i>4/28/05 2:00 PM 6/6/11</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE	

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