2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000001477

City-St-Zip:

Entity Name: RADIO NEW STAR INTERNATIONAL, INC

FILED Jul 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2408 LINWOOD AVE 4100 CORPORATE SQUARE BLVD 106 NAPLES, FL 34112 NAPLES, FL 34104 **Current Mailing Address: New Mailing Address:** 2408 LINWOOD AVE 4100 CORPORATE SQUARE BLVD NAPLES, FL 34112 NAPLES, FL 34104 FEI Number: 83-0471027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALUSMA, JOSUE SR. ALUSMA, JOSUE 7948 LEICESTER DR 7948 LEIĆESTER DR NAPLES, FL 34104 NAPLES, FL 34104 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: JOSUE ALUSMA 07/01/2008 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ALUSMA, JOSUE SR. ALUSMA, JOSUE Name: Name: 7948 LEICESTER DR 7948 LEICESTER DR Address: Address: NAPLES, FL 34104 US City-St-Zip: NAPLES, FL 34104 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition Name: MORISMA, DANIEL SR. Name: MORISMA, DANIEL 2408 LINWOOD AVE 4100 CORPORATE SQUARE BLVD 154 Address: Address: NAPLES, FL 34112 US NAPLES, FL 34112 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition SIRENORD, CHARLENE S Name: Name: 8690 WEIR DR 208 Address Address: City-St-Zip: City-St-Zip: NAPLES, FL 34104 US Title: () Delete Title: () Change (X) Addition ALUSMA, MIIREILLE Name: Name: Address: Address: 7948 LEICESTER DR

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.

City-St-Zip:

NAPLES, FL 34104 US

SIGNATURE: JOSUE ALUSMA P 07/01/2008