FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 21 1998 8:00am Secretary of State

1998 P9300000121 (2) DOCUMENT #
1. Corporation Name GOLD STAR DELIVERY, INC. Principal Place of Business Mailing Address 6016 ROBBINS OR N P O BOX 5038 JACKSONVILLE FL 32211 JACKSONVILLE FL 32247 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/28/1992 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 59-3171812 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name THALER, REBECCA A 6016 ROBBINS CIRCLE N 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32211 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stonature, typed or printed name of registered agent and tine if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change THALER, ROBB NAME 1.2 NAME **30 BISON COURT** STREET ADDRESS 1.3 STREET ADDRESS MIDDLEBURG FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition THALER, REBECCA A NAME 2.2 NAME **6016 ROBBINS CIR N** STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE THALER, ARTHUR H 3.2 NAME NAME 6016 ROBBINS CIR. N. STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL 32211 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TiTLE 4 1 TOTA F NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 61 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

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