FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000038134 (1)**

1. Corporate Name

ATLANTIC STAR, INC.

95 MAY 22 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2235 SOUTH WOODLAND BLVD.
DELAND FL 32724

Mailing Address
2235 SOUTH WOODLAND BLVD.
DELAND FL 32724

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/26/1993
3a. Date of Last Report: 12/27/1994

2. Principal Place of Business
21 2235 South Woodland Blvd
Suite Apt # etc. 22
City & State 23 Deland FL
Zip 24 32720 25 Volusia

2a. Mailing Address
26 Same
Suite Apt # etc. 27
City & State 28
Zip 29 Country 30

4. FEI Number: 59-3189161 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. [illegible] ☐ — $5.00 May Be Added to Fees
8. [illegible] Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BERNER, RANDY W
2235 SOUTH WOODLAND BLVD.
DELAND FL 32724

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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
[illegible] Registered Agent signature required when resigning — DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	BERNER, RANDY W
STREET ADDRESS	2235 S. WOODLAND BLVD.
CITY ST ZIP	DELAND FL 32724
TITLE	DST
NAME	TIBBY, PATRICK
STREET ADDRESS	1890 HONTOON RD.
CITY ST ZIP	DELAND FL 32724
TITLE	S
NAME	TIBBY, PAUL
STREET ADDRESS	2007 HONTOON RD.
CITY ST ZIP	DELAND FL 32724
TITLE	T
NAME	TIBBY, PHYLLIS
STREET ADDRESS	2007 HONTOON RD.
CITY ST ZIP	DELAND FL 32724
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. [illegible] ☐ Change ☐ Addition

1 TITLE	
2 NAME	
3 STREET ADDRESS	
4 CITY ST ZIP	
2 TITLE	
2 NAME	
2 STREET ADDRESS	
2 CITY ST ZIP	
3 TITLE	
3 NAME	
3 STREET ADDRESS	
3 CITY ST ZIP	
4 TITLE	
4 NAME	
4 STREET ADDRESS	
4 CITY ST ZIP	
5 TITLE	
5 NAME	
5 STREET ADDRESS	
5 CITY ST ZIP	
6 TITLE	
6 NAME	
6 STREET ADDRESS	
6 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and is correct 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.

SIGNATURE: x Randy Berner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

x 5/17/95 904-238-0440
Date Daytime Phone #

0000300 FP

FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations (904) 487-6053

APPROVED AND FILED
[illegible] 10:15
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000038745 (4)**

1. Corporate Name
PENTON'S TRIM & GLASS, INC.

Principal Place of Business
2118 ST. MARYS AVENUE
PENSACOLA FL 32505

Mailing Address
2118 ST. MARYS AVENUE
PENSACOLA FL 32505

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: **06/01/1993**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # — 22
Suite, Apt. # — 27
City & State — 23
City & State — 28
Zip — 24
County — 25
Zip — 29
County — 30

4. FEI Number: **59-3186292** — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under S. 199.032* Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PENTON, WILLIAM C
2118 ST. MARYS AVENUE
PENSACOLA FL 32505

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1808 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
Registered Agent (if designated as President or Vice President) — Registered Agent (if designated after incorporation) — Date

12. OFFICERS AND DIRECTORS

Title	PD
Name	PENTON, WILLIAM C.
Street Address	2220 ST. MARYS AVE
City, St, Zip	PENSACOLA FL
Title	ST
Name	PENTON, MARJORIE
Street Address	2220 ST MARYS AVE
City, St, Zip	PENSACOLA FL
Title	VD
Name	COOK, TIM
Street Address	2118 ST MARYS AVE
City, St, Zip	PENSACOLA FL
Title	VD
Name	PENTON, DARREN
Street Address	2118 ST MARYS AVE
City, St, Zip	PENSACOLA FL
Title	
Name	
Street Address	
City, St, Zip	
Title	
Name	
Street Address	
City, St, Zip	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 Title — ☐ Change ☐ Addition
1.2 Name
1.3 Street Address
1.4 City, St, Zip

2.1 Title — ☐ Change ☐ Addition
2.2 Name
2.3 Street Address
2.4 City, St, Zip

3.1 Title — ☐ Change ☐ Addition
3.2 Name
3.3 Street Address
3.4 City, St, Zip

4.1 Title — ☐ Change ☐ Addition
4.2 Name
4.3 Street Address
4.4 City, St, Zip

5.1 Title — ☐ Change ☐ Addition
5.2 Name
5.3 Street Address
5.4 City, St, Zip

6.1 Title — ☐ Change ☐ Addition
6.2 Name
6.3 Street Address
6.4 City, St, Zip

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 supplemental 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 of this report or on an attachment with an officer or director title.

SIGNATURE: William C Penton — 5-17-95 — 904 4321825
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0387240 CP

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CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 22 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000039471 (6)**

1. Corporate Name
LUNA III DIRECT INC.

Principal Place of Business
~~3606 BEE RIDGE RD~~
~~#120~~
~~SARASOTA FL 34233~~
~~US~~

Mailing Address
~~3606 BEE RIDGE RD~~
~~#120~~
~~SARASOTA FL 34233~~
~~US~~

2583 JEFFERSON CIR.
SARASOTA, FL
34239

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/27/1993
3a. Date of Last Report: 04/08/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt # etc. — 22
Suite Apt # etc. — 27
City & State — 23
City & State — 28
ZIP — 24
County — 25
ZIP — 29
County — 30

4. FEI Number: 65-0417515 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. The corporation has totally or partially tax exempt assets under S. 199.072 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
BERKOWITZ, MARTI
2583 JEFFERSON CIR
~~[illegible]~~
SARASOTA FL 34239

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 607.0508 Florida Statutes, the above named corporation submits the 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

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	BERKOWITZ, MARTI A
STREET ADDRESS	2583 JEFFERSON CIR
CITY, ST, ZIP	SARASOTA FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS NOTED IN 12

14. I hereby certify that the information supplied with this report is accurate and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further, I hereby certify that the information indicated on the annual report or supplemental 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 (if changed) or is set forth in an attachment with an asterisk.

SIGNATURE: Marti B. Berkowitz — 17 MAY 95 — PRESIDENT

SIGNATURE AND TYPE OR PRINT NAME OF BOARD OFFICER OR DIRECTOR — Date — Corporate Seal

0340192 CP