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

APPROVED AND FILED

95 MAY -1 PM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000084733 (2)

1. Corporate Name
SOUTHERN STAR TOOLS, INC.

Principal Place of Business
3601 VAN BUREN ST
UNIT 27
HOLLYWOOD FL 33021

Mailing Address
3601 VAN BUREN ST
UNIT 27
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/21/1994
3a. Date of Last Report:

2. Principal Place of Business
21 530 NW 206 AVE
Suite, Apt. #, etc.
22 Pembroke Pines
City & State
23 Florida
Zip 24 33029 Country 25 Broward

2a. Mailing Address
26 530 NW 206 AVE
Suite, Apt. #, etc.
27 Pembroke Pines
City & State
28 Florida
Zip 29 33029 Country 30 Broward

4. FEI Number: 65-0537138 — 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
AMERILAWYER
343 ALMERIA AVE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 Zip Code

11. Pursuant to the provisions of Section 607.0501 and 607.0505, 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. The 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

P
OROZCO, MAURICIO J
3601 VAN BUREN ST UNIT 27
HOLLYWOOD FL 33021

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

[✓] Change [ ] Add

MAURICIO J OROZCO
530 NW 206 AVE
Pembroke Pines FL 33029

14. I hereby certify that I am familiar with the contents of this report, and that the information indicated on the report complies with the requirements of Section 607.0501, Florida Statutes, and that, to the best of my knowledge, the information indicated on the report or supplemental annual report is true and accurate. I further certify that the principal place of business and mailing address shown on the report are the addresses at which the corporation transacts its business on a regular basis. I further certify that I am an officer or director of the corporation or the registered agent of the corporation, and that I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: MAURICIO OROZCO 4/26/95 (305) 430-4013
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0002445 CP