2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 26, 2005 08:00 AM Secretary of State DOCUMENT # P95000051653 1. Entity Name DAY STAR ELECTRIC, INC. Principal Place of Business Mailing Address 830 NE 122ND STREET 830 NE 122ND STREET NO. MIAMI FL 33161 NO. MIAMI FL 33161 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. CR2E034 (10/04) 1st MOORE City & State City & State 4. FEI Number Applied For 65-0593639 Not Applicable Zip Country Žib Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GOCKENBACH, HENRY E Street Address (P.O. Box Number is Not Acceptable) 830 NE 122ND STREET NO. MIAMI FL 33161 City 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 tire obligations of registered agent. SIGNATURE. Signature, typed or printed name of tegistered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. HILE TITLE ☐ Change Delete Addition NAME GOCKENBACH, HENRY E NAME U00000331679 04/26/05-80027-011 150.00 830 NE 122ND STREET STREET ADDRESS STREET ADDRESS CITY ST-ZIP NORTH MIAMI FL 33161 CITY-ST-ZIP AVSD TITLE Delete TITLE [7] Change Addition CALDERON, JORGE P NAME NAME STREET ADDRESS 236 NW 101ST ST STREET ADDRESS MIAMI SHORES FL 33100 CITY-ST-ZIP CITY-ST-ZIP ۷D Addition TITLE Delete Change NAME GOCKENBACH, HENRY A NAME STREET ADDRESS 830 NE 122ND STREET STREET ADDRESS CITY-ST-ZIP NORTH MIAMI FL 33161 CITY-SI-ZIP TITLE ☐ Delete- ·--☐ Change Addition | NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-SI-ZiP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Addition ☐ Defete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY ST. ZIP CITY-ST-ZIP

SIGNATURE: Henry Hocheshel HENRY GOCKENBACH 4-18-05 305-893-0821
SIGNATURE: Date OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Description of Descrip

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes | 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! 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.