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Mar 10 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000001769 (4)

1. Corporation Name  
OCEAN STAR, INC.

Principal Place of Business  
160 SW 12 AVENUE  
SUITE 101-B  
DEERFIELD BEACH FL 33442

Mailing Address  
160 SW 12 AVENUE  
SUITE 101-B  
DEERFIELD BEACH FL 33442-3114



3. Date Incorporated or Qualified 01/05/1996	3a. Date of Last Report
4. FEI Number 65-0648362	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 407 Lincoln Road Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 10F City & State	27 City & State
23 Miami Beach, FL Zip Country	28 Zip Country
24 33139 25 USA	29 30

9. Name and Address of Current Registered Agent  
WERKSMAN, ALAN J  
160 SW 12 AVENUE  
SUITE 101-B  
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent  
81 Name GIULIO SANTORO  
82 Street Address (P.O. Box Number is Not Acceptable)  
407 Lincoln Rd.  
83 Suite 10F  
84 City Miami Beach FL 85 Zip Code 33139

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 *Giulio Santoro* GIULIO SANTORO 3/4/97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	SANTORO, GIULIO R
STREET ADDRESS	407 LINCOLN ROAD, 10F
CITY - ST - ZIP	MIAMI BEACH FL 33139
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	SALUSTRO, STEFANO
STREET ADDRESS	VIA CALZAVECCHIO 23
CITY - ST - ZIP	CASALECCHIO DI RENO BO ITALY
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	DPS <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Giulio Santoro
1.3 STREET ADDRESS	407 Lincoln Rd. Suite 10 F
1.4 CITY - ST - ZIP	Miami Beach, FL 33139
2.1 TITLE	VPT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Pier Luigi Ruggeri
2.3 STREET ADDRESS	Via Ruvigliana 23
2.4 CITY - ST - ZIP	Lugano-Viganello, Switzerland
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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, if changed, or in an attachment with an address.

SIGNATURE: *Giulio R. Santoro* GIULIO R. SANTORO President 2/10/97 305-532-4992  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)