SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000042322 (3)				,	
LOANSTAR CAPITAL, INC.					
				L CERTA PRINCIPAL PARA DELLA CONTRACTORIA DE LA CARRACTORIA DEL CARRACTORIA DE LA CA	i i i i i i i i i i i i i i i i i i i
Principal Plac	e of Rusiness	Mailing Address	·		1010 11003 1886 11010 1101 1108
264 ROCK HILL CT 264 ROCK HILL CT					
STORM BLDG		STORM BLDG		1	
MARCO ISLAND FL 34145		MARCO ISLAND FL 34145		DO NOT WRITE IN THIS	SPACE
US		US		3. Date Incorporated or Qualified	
2. Principal Place of Business		2a. Malling Address		05/17/1996 4. FEI Number	Applied For
21		26 -P.O.Bo	L 1400	65-0669955	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required	
City & State		City & State	11/11	6. Election Campaign Financing	\$5.00 May Be
23		28 MARCO IS/		Trust Fund Contribution	Added to Fees
Zip	Country	214/	Country	8. This corporation owes or has paid the cur	2
24	9. Name and Address of Curren	1 Registered Agent	01	Personal Property Tax due June 30 10. Name and Address of New Registered	Yds No
CDE	· · · · · · · · · · · · · · · · · · ·	t tradistaten Albant	81 Name	19. Hallie and Address of New Registered	ngorit .
Greusel, Jamie B C/O Berry & Greusel			1		
1104 NORTH COLLIER BLVD.			82 Street Addre	ddress (P.O. Box Number is Not Acceptable)	
MARCO (SLAND FL 89837- 34/45			83		
37(73			84 City		85 Zip Code
			64 City	FL	85 Zip Code
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					
12.	Signature, typed or printed name of registered agen		: Registered Agent signature requi	Ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTODE IN 40
TITLE	OFFICERS AND DIRECTORS DELETE		1.1 TITLE	Change Addition	
NAME	STORM, RICHARD JR		1.2 NAME	Cliange C vooilion 2	
STREET ADDRESS			1.3 STREET ADDRESS		Ë
CITY-ST-ZIP	MARCO ISLAND FL		1.4 CITY-ST-ZIP		D DIRECTORS IN 12 Change Addition Change Addition CHOST
TITLE	ST	DELETE	2 1 TITLE		Change Addition
NAME	STORM, KATHLEEN D		2.2 NAME		
STREET ADDRESS	DRESS 284 ROCK HILL CT		2.3 STREET ADDRESS		
CITY ST-ZIP	MARCO ISLAND FL		2.4 CITY-ST-ZIP		
TITLE	·	DELETE	3.1 TITLE		Change
NAME	ļ		3.2 NAME		
STREET ADDRESS	:		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	,		4.2 NAME	1	Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	~	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	3000025919	
STREET ADDRESS			5.3 STREET ADDRESS	-07/17/98010680)I3
CITY-ST-ZIP			5.4 CITY-ST-ZIP	***550.00	
TITLE		DELETE	6.1 TITLE	ومندر ومدار المدار ومدار ومدار ومدار ومدار المدار	Change Adouted
NAME			6.2 NAME	3000025919	22 ///////
STREET ADDRESS			6.3 STREET ADDRESS	-07/17/98010680 ***8.75	115
CITY-ST-ZIP	adifu that the information winning a with	this line does not qualify for the	6.4 CiTY-ST-ZIP	赤非常は、(つ ion 119.07(3)(i), Florida Statutes. I further certify t	hat the information
indicated of	on this applied reports or supplied with	one mining does not quality for the	exemption stated in 590) each that my signature	shall have the same lenal effect as if made unde	nor the that I am

4. I needy certify that the information supplied with rightling does not qualify for the exemption stated in section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental enhalf report is true and float that my signature shall have the same legal effect as if made under early that I am an officer or director of the corporation or the receiver or this true employee and this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block (3 if changed, or op an attachment with an addition.)

SIGNATURE:

en and the surface

7/6/98 (941)642-6006

FILED

Jul 16 1998 8:00am

Secretary of State