

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052962

Entity Name: TRI-STAR SALES, INC.

FILED
Mar 08, 2007
Secretary of State

Current Principal Place of Business:

6105 HIGHWOOD PARK LN
NAPLES, FL 34110 US

New Principal Place of Business:

14055 TIVOLI TERRACE
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

6105 HIGHWOOD PARK LN
NAPLES, FL 34110 US

New Mailing Address:

14055 TIVOLI TERRACE
BONITA SPRINGS, FL 34135 US

FEI Number: 65-0674973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRETT, THOMAS M
6105 HIGHLAND PARK LANE
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

BARRETT, THOMAS M
14055 TIVOLI TERRACE
BONITA SPRINGS, FL 34135 US

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.

SIGNATURE:

03/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: THOMAS BARRETT,
Address: 6105 HIGHWOOD PARK LANE
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: THOMAS, BARRETT M PRES.
Address: 14055 TIVOLI TERRACE
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS M BARRETT

PRES

03/08/2007

Electronic Signature of Signing Officer or Director

Date