FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000083699 1. Corporation Name ROADSTAR INTERNATIONAL, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90015 001 ***150.00



Principal Place of Business	Mailing Address		_	+ 10011005 tra 10146 Billy about about about being still being still being cause neut coor
5623 LOUISE XIV COURT APARTMENT A TAMPA FL 33614 TAMPA FL 33614			DO NOT WRITE IN THIS SPACE	
				3. Date Encorporated or Qualifed 10/07/1996
2. Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For
21	26			59-3409316 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	City & State			6. Electic n Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	1	8. This curporation owes the current year Intangible
24 25	29 30			Personal Property Tax. Yes No
9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
		81	Name	
RAMIREZ, JAIRO J 5623 LOUISE XIV COURT		82	Street A	Acidress (P.O. Bo) Number is Not Acceptable)
APARTMENT A		83	·	
TAMPA FL 33614		84	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 approximent as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATUFE				
Signature, typed or printed name of registered agent			nt signature re	equired when reinstating) DATE DATE
12. OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOF'S IN 12 Change
TITLE PD	☐ DÉLETE	1.1 TITLE		Criange Addition
NAME RAMIREZ, JAIRO J		1.2 NAME		
STREET ADDRESS 5623 LOUISE XIV COURT, APAR	TMENT A	1.3 STREE	TADDRESS	
CITY-ST-ZIP TAMPA FL 33614		14 CITY-1	ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME	İ	
STREET ADDRESS	3	2.3 STREE	TADDRESS	
CITY-ST-ZIP		2. 4 CITY-	ST-ZIP	
TITLE	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME)	
STREET ADDRE 3S		3.3 STREE	T ADDRESS	
CITY-ST-ZiP		3.4. CITY-	ST-ZIP	
TITLE	☐ OELETE	41 TITLE		☐ Change ☐ Addition
NAME		4, 2 NAME	:	
STREET ADORE :S		4.3 STREE	TADDRESS	
CITY-ST-ZIP		4.4 CITY-	ST-ZIP	
TITLE	☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME	ļ	
STREET ADDRESS		5.3 STREE	T ADDRESS	
CITY-ST-ZIP		5.4 CITY-	ST-ZIP	
TITLE	☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		63 STREE	TADDRESS	
CITY-ST-ZIP		6.4 CITY-	ST-ZIP	

14. 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. 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 of trustee empowered to εxecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or option attachment with an address, with a lother like empowered.

SIGNATURES

CITY-ST-ZIP

URE AND TYPED OR FRINTED NAME