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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90181 028 ***150.00

DOCUMENT # P96000098965 1. Corporation Name

TRI-STAR EQUITY INC.

4 10011001 .co :0:10 acces	

Principal Place	e of Business	Mailing Address			
6180 SUN BLVD #114 6180 SUN BLVD #114				·	
ST PETERSBUR	G FL 33/15	ST PETERSBURG FL 33715			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
		_			12/05/1996
2. Principal Pi	lace of Business	2a. Mailing Address	IL	Blue	4. FEI Number Applied For
21 8008	COH DIVA		17	PIV	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State	ete BEACH FI	201	ach		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	"SA	8. This corporation owes the current year Intangible Personal Property Tax Yes
24 337 D		29 33706 3	0 (<i>)</i> 511	Personal Property Tax. Yes No 10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	-	31 Name	11.
MCD	ONOUGH, MICHAEL			/	MCDONOUGH MICHAEL S.
	SUN BLVD #114		8	32 Street	Address (P.O. Box Number is Not Acceptable)
	ETERSBURG FL 33715		1	33 ~	-
			L	E	
				CityS	57 Pete Bench FL 85 33706
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abo	ove-named	d corporation submits this statement for the purpose of changing its registered
agent. I a	m familiar with and accept the obligation	ors of, Section 607.0505, Florid	a Statut	es.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Mills Millery	V PSDT			1-25-99
	Signature, typed or printed name of registered count OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	egistered A	gent signature r	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. TITLE	PSDT	DELETE	1.1 TITL	F	PCD T Penange Addition
NAME	MCDONOUGH, MICHAEL		1.2 NAM		MCDONOSCH MICHAEL S. 8 8228 GUIF BLD
STREET ADDRESS	6180 SUN BLVD #114			EET ADDRESS	8 8228 GUIF BUD
CITY-ST-ZIP	ST PETERSBURG FL 33715		1	-ST-ZIP	57 Pete BEACH F133706
TITLE	0112100011011	☐ DELETE	2.1 TITL		☐ Change ☐ Addition
NAME			2.2 NAM	Ε	·
STREET ADDRESS			2.3 STR	EET ADORESS	s
CITY-ST-ZIP			2.4 CIT	Y-ST-ZIP	
TITLE		☐ DELETE	3.1 TITL	E	Change Addition
NAME			3.2 NAM	Ε	·
STREET ADDRESS			3.3 STR	EET ADDRESS	s
CITY-ST-ZIP		_	3.4. CIT	Y-ST-ZIP	
TITLE		☐ DELETE	4,1 TITL	E	☐ Change ☐ Addition
NAME			4. 2 NAM	ME .	
STREET ADDRESS			4.3 STR	EET ADDRESS	s
CITY-ST-ZIP			4.4 CITY	-ST-ZIP	
TITLE		☐ DELETE	5.1 TITL		☐ Change ☐ Addition
NAME			5.2 NAM		
STREET ADDRESS				EET ADDRESS	S
CITY-ST-ZIP				'-ST-ZIP	
TMLE		☐ DELETE	6.1 TITL		☐ Change ☐ Addition
NAME		· —	6.2 NAM		
STREET ADDRESS				EET ADDRESS	8
0.00 07 700			■ 64 CITY	-ST-7IP	- I

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 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 on an appearing with an address, with all other like empowered.

SIGNATURE:

GNING OFFICER OR DIRECTOR