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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortkam 🗖

Secretary of State

DIVISION OF COPPORATE AS

DOCUMENT # P97000011687 (5)

LONE STAR PRODUCTS, INC.

FILED

Jun 02 1998 8:00am

Secretary of State

Principal Place of Business	Mailing Address		
817 COURT STREET CLEARWATER FL 34616 817 COURT STREET CLEARWATER FL 34616		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified
8. Drive incl. Place of Dunivers	La Mallac Address		02/05/1997
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For Not Applied be
Suite, Apt. #, etc.	Suite, Apt #, etc.		SR 75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country	7(p)	Country	8. This corporation owes or has pald the current year Intangible
24 25	29	30	Personal Property Tax due June 30. Yes No
9. Name and Address of Co	• • · · · · · · · · · · · · · · · · · ·	B4 No	10. Name and Address of New Registered Agent
TAX, ACCOUNTING & RESEAR	CH, INC.	81 Name	HELEP SELVORMAN
1992 BONNIE COURT		82 Stree Ad	dress (P.O. Box Number is Not Acceptable)
DUNEDIN FL 34698		83	7 CBWG 51.
		04 04	
• 00		84 City C	LEACH FL 85 Zip Core
11. Pursuant to the provisions of Sections 60	.0502 ar 7607 1508, Florida Statu	les, the above-named co	rporation submits this statement for the purpose of changing its registered
agent I am familiar with, and agreent the c	obligations of, Section 607.0505, F	orida Statutes.	alion's board of directors. I hereby accept the appointment as registered
SIGNATURE Signature type of the name of regard	of agent and little if applicable (NO	7: Registered Agont signature req	1/39/98
	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE President	DELETE	111ITUE	☐ Change ☐ Addition
NAME Photip Silverman		1 2 NAME	
STRET ADDESS 12960 106th Aven		1.3 STREET ADDRESS	
CITY-SI-ZIP Largo, Florida	33774 DELETE	1.4 C/TY - ST - ZIP 2.1 TITLE	Change Addition
NAME	[1] peceve	2.2 NAME	C Quando C Vocation
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2. 4 CITY - ST - ZIP	· •
TITLE	☐ DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS CITY-ST-ZIP		3.3 STREET ADDRESS	
TITLE	DELETE	3.4 CITY-S1-ZIP 4.1 TITLE	Change Addition
NAME	_	4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME OTHERS ADDRESS		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	700002468250Change Addition
NAME	beard over the	6.2 NAME	-03/25/9801076025 J\/
STREET ADDRESS		6.3 STREET ADDRESS	***600.00
CITY-ST-ZIP		6.4 CITY - ST - ZIP	

4. Thereby certify that the information supplied with this filling done to average 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 smith a filling that I am an officer or director of the corporation on the corporation on the corporation on the corporation of the c

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