2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 28, 2002 8:00 am Secretary of State P97000022023 **DOCUMENT#** 1. Entity Name ALL-STAR: GOLF, INC. 07-28-2002 90202 025 ***150.00 Principal Place of Business Mailing Address 9130 RIDGE ROAD 9130 RIDGE ROAD ~~~~~~~~ NEW PORT RICHEY FL 34654 **NEW PORT RICHEY FL 34654** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3432329 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EVERETT, STEVEN Street Address (P.O. Box Number is Not Acceptable) 9130 RIDGE RD **NEW: PORT RICHEY FL 34654** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE DPS ☐ Delete TITLE ☐ Addition **EVERETT, STEVEN** NAME NAME STREET ADDRESS 9130 RIDGE RD STREET ADDRESS CITY-ST-ZIP **NEW PORT RICHEY FL 34654** CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP. CITY-ST-ZIP-TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

13. 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 report or supplemental 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

GOLF

Attackneut p# pgn000022023

July 22,2002

DEAR SIRS:

I did NOT RECIEVE YOUR PRIOR NOTICE.

THIS IS THE ONLY NOTICE I have RECIEVED THIS YEAR.

IF YOU CHECK YOUR RECORDS, YOU SEE THAT WE ALWAYS

HAVE PAID ON TIME IN PRIOR YEARS.

THONKS

Sten Evereto