FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 前侧侧 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 90 OCT 13 AEII: 21 DIVISION OF CORPORATIONS 1998 DOCUMENT # P97 000065092 SACO TÁILA VIDE E ELORIDA Allstar Messenger, Inc. Principal Place of usiness Mailing Address 4483 N.W. 36th St. Suite # 115 Miami Springs, FL. 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0773456 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Zip Country ZiD Country 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 25 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name Vunior Bella 375 East 61 sti Hialeah ,FL 33013 Street Address (P.O. Box Number is Not Acceptable) 83 84 City Zip Code 11. Pursuant to the provisions (1) 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. I am landline with and accept the appointment as registered agent. I am landline with and accept the appointment as registered statutes. ome of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling)
OFFICERS AND DIRECTORS
13. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. President / VP/S/T) DELETE ☐ Change ☐ Addition TITLE # 1.1 TIRLE NAME 1.2 NAME **000002663680--**3 -10/14/98-**-0**1065--010 1.3 STREET ADDRESS STREET AUDRESS Hipleah, FL 33013 -CITY-ST-ZIP 14 CITY-S1-ZIP ****150.00<u>1</u> ck##*150.00 DELETE TIFLE 211111 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS C(1Y - S1 - Z)F 2.4 CITY-ST-ZIP DELETE Change Addition THLE 3 1 TIRE 3.2 NAME 3.3 STREET ADDINESS STREET ADDRESS 3-4, CITY - \$1 - 7IP CITY-ST-ZIP DELETE Change Addition 4110116 4 2 NAMI NAMI 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - \$1 - ZID CHTY-ST-ZIP ☐ Addition ☐ DELETE 5 1 THEF IIP. 5 2 NAME NAME SV 10-13+ 5.3 STREET ADDRESS STRIFF ADDRESS City St. Zin 5 4 CHY-SI-ZIP DEFETE 6 I TILLE Change Addition BITTE NAME 62 NAME 63 STREET APPORESS STREET ADDRESS 6.4 C(1Y+S1-7)P

SIGNATURE:

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 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 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 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 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 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 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 supplied with the same legal effect as if made under only indicated and that my supplied with the same legal effect as if made under only indicated and that my supplied with the same legal effect as if made under only indicated and the same legal effect as if made under only indicated and that my supplied with the same legal effect as if made under only indicated and the same legal effect as if made under only indicated and the same legal effect as if made under only indicated and the same legal effect as if made under only indicated and the same legal effect as if made under only indicated and the same legal effect as if made under only indicated and the same legal effect as if made under only indic 305)888-7575

TO THE DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

ALLSTAR MESSENGER, INC. 4483 N.W. 36th STREET SUITE: 115 MIAMI, FLORIDA 33166 DOC.# P97000065092

TO: SEAN TONNER

ENCLOSED YOU WILL FIND A CHECK FOR \$150.00 TO COVER THE 1998 ANNUAL REPORT. I AM ALSO SENDING YOU THE COMPLETED FORM TO BE PROCESSED THE REASON FOR MY DELAY WAS BECAUSE I NEVER RECIEVED THE ACTUAL FORM DUE TO A CHANGE OF MAILING AND PRINCIPAL OFFICE. I WILL REALLY APPRECIATE THAT YOU CAN ACCEPT THIS PAYMENT AND PROCESS THE FORM AS SOON AS POSSIBLE. IF YOU SHOULD HAVE ANY QUESTIONS REGARDING THIS MATTER PLEASE DON'T HESITATE TO CONTACT ME. THANKS IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER THAT IS VERY IMPORTANT TO ME.

P.S. MY CHANGE OF ADDRESS WAS EFFECTIVE JAN. 98

> YUNION BELLA (P/VP/S/T)