

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

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Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000067174 (7)

1. Corporation Name

AMERICAN STAR OIL, INC.

Principal Place of Business

1504 CLEARLAKE ROAD
COCOA FL 32922

Mailing Address

1504 CLEARLAKE ROAD
COCOA FL 32922



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	1300 W AIRPORT BLVD	26	408 HIGH POINT DR.	08/01/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		19-346056	
City & State		City & State		5. Certificate of Status Desired	
23	SANFORD, FLORIDA	28	COCOA FLORIDA	<input type="checkbox"/> \$8.75 Additional Fee Required	
24	Zip 32711	29	Zip 32926	6. Election Campaign Financing Trust Fund Contribution	
25	Country USA	30	Country U.S.A.	<input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
LINTZ, LESTER 1970 MICHIGAN AVE. - BLDG. F COCOA FL 32922				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D. PRG. SECRETARY
NAME	SHAH, RAJENDRA R	1.2 NAME	
STREET ADDRESS	740 NICKLAUS DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32940	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	V.P.
NAME	SHAH, NISHITH	2.2 NAME	
STREET ADDRESS	4220 WEST KING ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA FL 32926	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	TREASURER
NAME	SHASTRI, NILESH	3.2 NAME	
STREET ADDRESS	8912 EAST COLONIAL DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	DIRECTOR
NAME	SUNIL SHAH	4.2 NAME	SUNIL SHAH
STREET ADDRESS	158 BLANDING BLVD	4.3 STREET ADDRESS	158 BLANDING BLVD
CITY-ST-ZIP	ORANGE PARK FL 32073	4.4 CITY-ST-ZIP	ORANGE PARK FL 32073
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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 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 on an attachment with an address.

SIGNATURE:

 Rajendra R. Shah

5/27/98

407-690-0807

CR2E034 (10/97)