2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000066192 --

SIGNATURE_

CITY-\$T-ZIP

CITY-ST-ZIP TITLE

TITLE NAME STREET ADDRESS

NAME STREET ADDRESS CJTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED Feb 24, 2005 08:00 AM Secretary of State

1. Entity Name FOOD STAR, INC.	*				
Principal Place of Business	Mailing Address	- 	-		
10373 SOUTHERN BOULEVARD ROYAL PALM BEACH, FL 33411	10373 Southern Boulevi Royal Palm Beach, FL 33	IRD 411			
	J	Podd Pro 1	02012005 No Chg-P CR2E	034 (10/03)	
DO NOT WRITE IN THIS SPACE		4. FEI Number	Applied For		
			65-0868058	Not Applicable	
			Certificate of Status Desired		
6. Name and Address of C	urrent Registered Agent				
TONG, CHI YAM 10373 SOUTHERN BOULEVARD ROYAL PALM BEACH, FL 33411			DO NOT WRITE IN THIS SPACE		
The above named entity submits this state the obligations of registered agent.	ment for the purpose of changing its regist	ered office or registere	ed agent, or both, in the State of Florida. I am	familiar with, and accept	

(NOTE Registered Agent signature required when reinstating)

	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	 	
TITLE	PTD			
NAME	TONG, CHI YAM			
STREET ADDRESS	1075 ASPRI WAY	j.		
CITY-ST-ZIP	WEST PALM BEACH, FL 33418			
TITLE	VPSD	 		
NAME	PHEH, WENG HENG			
STREET ADDRESS	10373 SOUTHERN BOULEVARD			

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

ROYAL PALM BEACH, FL 33411

100000240744 U2/24/U5-80015-013 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)[f]. 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 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 10 or Block 11 if

changed, or on an attachment with an address, wi	th all other like empowered.	and the state of t	opposite in Blook to at Blook
SIGNATURE: 7500	CHI YAM TONG , PRESIDENT	02/18/05	(954)946.8011
SIGNATURE AND TYPED OR PRI	NTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Davime Phone #