## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P99000079318

FILED Oct 14, 2006 Secretary of State

Entity Name: LONE STA	AR INVESTMENTS, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
580 CINDY CIRCLE LANE WELLINGTON, FL 33414				
Current Mailing Address:		New Mailing Address:		
580 CINDY CIRCLE LANE WELLINGTON, FL 33414				
FEI Number: 65-0946476	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
BOLIVAR, ALVARO 580 CINDY CIRCLE LANE WELLINGTON, FL 33414				
The above named entity suin the State of Florida.	ubmits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic	c Signature of Registered Age	nt	Date	

Title:

## **OFFICERS AND DIRECTORS:**

( ) Delete

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

BOLIVAR, ALLVARO SR. BOLIVAR, ALVARO SR. Name: Name: 580 CINDY CIRCLE LANE 580 CINDY CIRCLE LANE Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414 Title: ( ) Delete Title: VD ( ) Change (X) Addition BOLIVAR, BERTHA Name: Name:

Address: Address: 580 CINDY CIRCLE LANE City-St-Zip: WELLINGTON, FL 33414 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERTHA BOLIVAR VD 10/14/2006