

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90011 043 ***150.00

0415601

DOCUMENT # S78781

1. Corporation Name
SUNSTAR TECHNOLOGY CORPORATION INC.

Principal Place of Business

2431 ESTANCIA BLVD
BUILDING B
CLEARWATER FL 34621
US

Mailing Address

2431 ESTANCIA BLVD
BUILDING B
CLEARWATER FL 34621
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/05/1991

4. FEI Number

59-3083227

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 200 EMERALD BAY DRIVE

2a. Mailing Address

26 200 EMERALD BAY DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 OLDSMAR, FLORIDA

City & State

28 OLDSMAR, FLORIDA

Zip

24 34677

Country

25 Pinellas

Zip

29 34677

Country

30 Pinellas

9. Name and Address of Current Registered Agent

SILVERS, LARRY
2431 ESTANCIA BLVD
BUILDING B
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

200 EMERALD BAY DR.

83

84 City

OLDSMAR

FL

85 Zip Code

34677

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

1-25-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
SILVERS, LARRY
STREET ADDRESS
2431 ESTANCIA BLVD
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
SILVERS, GINA
STREET ADDRESS
2431 ESTANCIA BLVD
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
SPROFFERO, LYNNE
STREET ADDRESS
2431 ESTANCIA BLVD
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
200 Emerald Bay Dr.
1.4 CITY-ST-ZIP
OLDSMAR, FL. 34677

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
200 Emerald Bay Dr.
2.4 CITY-ST-ZIP
OLDSMAR, FL. 34677

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
200 Emerald Bay Dr.
3.4 CITY-ST-ZIP
OLDSMAR, FL. 34677

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/99 813-818-9721

Date

Daytime Phone #

CR2E034 (11/98)