FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 5:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S82309** **(3)**

1. Corporate Name
PULSAR ENTERPRISES CORPORATION

Principal Place of Business
PO BOX 526245
MIAMI FL 33152-6245

Mailing Address
PO BOX 526245
MIAMI FL 33152-6245

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/24/1991**
3a. Date of Last Report: **04/26/1994**

2. Principal Place of Business
21 8262 N W 14 ST
Suite, Apt. #, etc.
22
City & State
23 MIAMI - FL
Zip 24 33126 County 25 USA

2a. Mailing Address
26 P.O. BOX 526245
Suite, Apt. #, etc.
27
City & State
28 MIAMI - FL
Zip 29 33152 County 30 USA

4. FEI Number
65-0290697
☐ 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 has [illegible] pursuant to s. 192.037 Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BARTH, MARTA
8262 NW 14 ST
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name: BARTH, MARICEL
82 Street Address (P.O. Box Number is Not Acceptable): 10231 FONTAINEBLEU BLVD #105
83 Unit 105
84 City: MIAMI FL 85 Zip Code: 33172

11. Pursuant to the provisions of [illegible] 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
(If changing Registered Agent, Registered Agent must sign above) (If changing Registered Agent, new Registered Agent must sign above) (Date)

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
D BARTH, MARTA 10231 FONT BLVD #105 MIAMI FL	☐ Change ☒ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I declare, under that the information supplied with this filing is accurate and 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 a director or officer 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.

SIGNATURE: [signature] 01-30-95 305 5942290
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0163100 CP