SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

FILED AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Aug 27 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name (6)STAR PRINTING AND PUBLISHING, INC. Principal Place of Business Mailing Address 609 NORTH RAILROAD AVENUE 609 NORTH RAILROAD AVENUE **BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/17/1992 2. Principal Place of Business of Road 2a. Malling Address 4. FEI Number Applied For 4290 NW 62 cd Rd 21 4290 NW (od Suite, Apt. #, etc. 06-1334562 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible USA 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOLDBERG, ALBERT S. 3120 SOUTH OCEAN BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **APARTMENT 2-503** 83 PALM BEACH FL 33480 84 City Zip Code 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) CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition MARCUS, PHILIP N 1.2 NAME NAME 18380 LONG LAKE DR 1.3 STREET ADDRESS STREET ADDRESS **BOÇA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE NAME MARCUS, MICHELLE 2.2 NAME STREET ADDRESS 18380 LONG LAKE DR 2.3 STREET ADDRESS **BOCA RATON FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE Change Addition TITLE DELETE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIF 4.1 TITLE TITLE DELETE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY ST-ZIP DELETE SITHE TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE Change Addition

DELETE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

TITLE NAME

STREET ADDRESS

SIGNATURE:

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 effective 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 effective 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 effective 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 effective 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 effective 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 effective or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.