

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**

DOCUMENT # **V69757 (5)**
1. Corporation Name
WESTERN STAR VENTURES, INC.

22 MAY -1 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: P.O. BOX 223641
HOLLYWOOD FL 33022
Mailing Address: P.O. BOX 223641
HOLLYWOOD FL 33022

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/08/1992**
3a. Date of Last Payment: **05/01/1994**

4. FCI Number: **NOT APPLICABLE**
Apply Fee: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under § 199.03, Florida Statutes: Yes No

2. Principal Place of Business	2a. Mailing Address
21. State and # of City	26. State and # of City
22. City, State	27. City, State
23. Country	28. Country
24. Country	29. Country

9. Name and Address of Current Registered Agent
**OLDANI, JOSEPH J II
1720 HARRISON STR
STE 1805
HOLLYWOOD FL 33020**

10. Name and Address of New Registered Agent
81. Name:
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. State: **FL**

11. I, the undersigned, in compliance with sections 199.01, 199.02, and 199.03, Florida Statutes, the person authorized to execute and file this statement for the purpose of changing the registered office of a corporation is authorized to file in the State of Florida a New Certificate of Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent for the corporation with effect from the date of filing of this statement with the Florida Statutes.

SIGNATURE: **JOSEPH J. Oldani II** April 26 95

12. OFFICERS AND DIRECTORS

NAME	POSITION
LUFF, MEL	Director
1720 HARRISON STR #1805	JOSEPH J. Oldani
HOLLYWOOD FL	1720 HARRISON STR. STE 1805
	Hollywood, FL 33020

13. ADDED INFORMATION

Exchange: Master

Change: Addition

Change: Addition

Change: Addition

Change: Addition

Change: Addition

Change: Addition

Change: Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(1)(b), Florida Statutes. I further certify that the information included 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 at the receipt of the above information to be used in this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 of this report, or on an attachment with an address.

SIGNATURE: **JOSEPH J. Oldani II** 4-26-95 9:52:27
DIRECTOR