

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000019197

**Entity Name:** WOLSTAR INC.

**Current Principal Place of Business:**

4905 SEVILLE COURT  
CAPE CORAL, FL 33904

**Current Mailing Address:**

804 NICHOLAS PKWY EAST  
SUITE 1  
CAPE CORAL, FL 33990 US

**FEI Number:** 86-2385538

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HILL, THOMAS W  
804 NICHOLAS PKWY EAST  
STE 1  
CAPE CORAL, FL 33990 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BRUSIUS, STANKA  
Address JOSEPH-HAYDN-STRASSE 26  
City-State-Zip: BAD SODEN DE 65812

Title VP  
Name BRUSIUS, WOLFGANG  
Address JOSEPH-HAYDN-STRASSE 26  
City-State-Zip: BAD SODEN DE 65812

Title T  
Name BRUSIUS, BILJANA  
Address JOSEPH-HAYDN-STRASSE 26  
City-State-Zip: BAD SODEN DE 65812

Title T  
Name STENZEL, ALEXANDER  
Address JOSEPH-HAYDN-STRASSE 26  
City-State-Zip: BAD SODEN DE 65812

Title T  
Name BRUSIUS, BIANCA  
Address JOSEPH-HAYDN-STRASSE 26  
City-State-Zip: BAD SODEN DE 65812

Title SECR  
Name HILL, THOMAS W  
Address 804 NICHOLAS PKWY E, STE 1  
City-State-Zip: CAPE CORAL FL 33990

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRUSIUS , STANKA

P

04/22/2025

Electronic Signature of Signing Officer/Director Detail

Date