2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 21, 2015
Secretary of State
CC4178078534

DOCUMENT# P96000022420

Entity Name: TWIN-STAR INTERNATIONAL, INC.

Current Principal Place of Business:

1690 S CONGRESS AVENUE, SUITE 210
DELRAY BEACH, FL 33445

Current Mailing Address:

550 SOUTH DIXIE HIGHWAY
SUITE 300
CORAL GABLES, FL 33146 US

FEI Number: 65-0650158

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	CO-PRESIDENT, CFO
Name	HARPER, PETER
Address	1690 S CONGRESS AVENUE, SUITE 210
City-State-Zip:	DELRAY BEACH FL 33445

Title	CO-PRESIDENT
Name	SCULLER, MARC
Address	1690 S CONGRESS AVENUE, SUITE 210
City-State-Zip:	DELRAY BEACH FL 33445

Title	DIRECTOR, VP, AUTHORIZED SIGNATORY
Name	ELIAS, JON E
Address	550 SOUTH DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146

Title	VP, GENERAL COUNSEL, SECRETARY, AUTHORIZED SIGNATORY
Name	GERSHMAN, DAVID
Address	550 SOUTH DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146

Title	DIRECTOR, VP, AUTHORIZED SIGNATORY
Name	WILSON, RUSS
Address	550 SOUTH DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146

Title	CHAIRMAN
Name	TEMPLETON, TROY D
Address	550 SOUTH DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146

Title	ASSISTANT SECRETARY
Name	CALDERON, MICHELSA
Address	550 SOUTH DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146

Title	ASSISTANT SECRETARY
Name	ARIZA, URSULA T
Address	550 SOUTH DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146

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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: MICHELSA CALDERON ASSISTANT SECRETARY 10/21/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MINARIK, JAMES E.
Address	ONE VIPER WAY
City-State-Zip:	VISTA CA 92083

Title	VP OF CORPORATE OPERATIONS
Name	KANTROWITZ, DENISE
Address	1690 S. CONGRESS AVE, SUITE 210
City-State-Zip:	DELRAY BEACH FL 33445

Title	AUTHORIZED SIGNATORY
Name	CONNELL, BRIAN
Address	550 S. DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146