

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 299891

FILED
Apr 30, 2004
Secretary of State

Entity Name: STELLAR PARTNERS, INC.

Current Principal Place of Business:

BEAUMONT BUSINESS CENTER
5402 BEAUMONT CENTER BLVD SUITE 108
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

BEAUMONT BUSINESS CENTER
5402 BEAUMONT CENTER BLVD SUITE 108
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 59-1151071 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STACKHOUSE, SUSAN H
Address: % TAMPA INT'L AIRPORT MARRIOTT HOTEL G-100
City-St-Zip: TAMPA, FL 33607

Title: VPD () Delete
Name: GELLER, BARBARA
Address: 8619 PASTORE VIEW LANE
City-St-Zip: HOUSTON, TX

Title: ST () Delete
Name: CICCARELLO, SPRING M
Address: C/O TAMPA INT'L AIRPORT MARRIOTT HOTEL G100
City-St-Zip: TAMPA, FL 33607

Title: VP () Delete
Name: SUHS, CHRISTINE
Address: % TAMPA INT'L AIRPORT MARRIOTT HOTEL G-100
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STACKHOUSE, SUSAN H
Address: 5402 BEAUMONT CENTER BLVD. # 108
City-St-Zip: TAMPA, FL 33634

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: CICCARELLO, SPRING M
Address: 5402 BEAUMONT CENTER BLVD. # 108
City-St-Zip: TAMPA, FL 33634

Title: VP (X) Change () Addition
Name: SUHS, CHRISTINE
Address: 5402 BEAUMONT CENTER BLVD. # 108
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SUSAN STACKHOUSE

PD

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date