


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # 433300

1. Entity Name
STAR-BRITE DISTRIBUTING, INC.



Principal Place of Business Mailing Address

4041 S.W. 47 AVE. 4041 S.W. 47 AVE.
 FT LAUDERDALE, FL 33314 FT LAUDERDALE, FL 33314

DO NOT WRITE IN THIS SPACE



01192006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
59-1531532 Not Applicable

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

6. Name and Address of Current Registered Agent

DORNAU, PETER G
 4041 S.W. 47 AVE.
 FORT LAUDERDALE, FL 33314

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DORNAU, PETER G
STREET ADDRESS	4041 SW 47TH AVE.
CITY - ST - ZIP	FT LAUDERDALE, FL 00000,
TITLE	SD
NAME	TIEGER, JEFFREY
STREET ADDRESS	4041 SW 47TH AVE.
CITY - ST - ZIP	FT. LAUDERDALE, FL
TITLE	VD
NAME	ANCHEL, EDWARD
STREET ADDRESS	4041 SW 47TH AVENUE
CITY - ST - ZIP	FORT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 03/20/06-80036-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **DATE:** _____ **DAYTIME PHONE #:** _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR