

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M39748** (2)
Corporation Name
STARQUEST, INC.



Principal Place of Business 9601 S.W. 183RD STREET MIAMI FL 33157	Mailing Address 9601 S.W. 183RD STREET MIAMI FL 33157
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 14240 SW 139 CT Suite, Apt. #, etc. 22 City & State 23 MIAMI Florida Zip 24 33186		2a. Mailing Address 26 14240 SW 139 CT Suite, Apt. #, etc. 27 City & State 28 MIAMI Florida Zip 29 33186 Country 30 USA		3. Date Incorporated or Qualified 10/07/1986	
				4. FEI Number 59-2713222 Applied For ☒ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

**ECKEL, BRUCE
9601 S.W. 183RD STREET
MIAMI FL 33157**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS ECKEL, GISELA 9601 S.W. 183RDS STREET MIAMI FL	1.1 TITLE	☐ Change ☐ Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	D ECKEL, BRUCE 9601 S.W. 183RDS STREET MIAMI FL	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	T MARCHECO, ALBERT 9601 S.W. 183RDS STREET MIAMI FL	3.1 TITLE	☒ Change ☐ Addition
NAME		3.2 NAME	BRUCE Eckel
STREET ADDRESS		3.3 STREET ADDRESS	9601 SW 183 ST
CITY - ST - ZIP		3.4 CITY - ST - ZIP	MIAMI FL 33157
TITLE	D BADIA, ERNEST 5772 S.W. 84TH STREET MIAMI FL	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Bruce Eckel**

1/6/98 305-233-7921

CR2E034 (10/97)