2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102527

Entity Name: 14STAR CORPORATION

FILED Mar 09, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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931 SR 434 N 3385 STH. HWY. 17-92 SUITE 1255 SUITE 189

ALTAMONTE SPRINGS, FL 32714 CASSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

931 SR 434 N 3385 STH. HWY. 17-92 SUITE 1255 SUITE 189

ALTAMONTE SPRINGS, FL 32714 CASSELBERRY, FL 32707

FEI Number: 59-3679153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PATEL, PRABODH C ESQ
836 EAGLE CLARO CT
836 EAGLE CLAW CT
LAKE MARY, FL 32746 US
836 EAGLE CLAW CT
LAKE MARY, FL 32746 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: 03/09/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: HANSRAJ, IMTIAZ Name: HANSRAJ, NAHEED

Address: 910 SR 434N SUITE S18, Address: 3385 STH. HWY. 17-92 , SUITE 189

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: CASSELBEERY, FL 32707

Title: T () Delete Title: () Change () Addition Name: AHMAD. AFTAB Name:

 Address:
 8139 INVERNESS RIDGE RD.
 Address:

 City-St-Zip:
 POTOMAC, MD 20854
 City-St-Zip:

Title: VS () Delete Title: () Change () Addition

 Name:
 RASHID, ZAMEER
 Name:

 Address:
 836 EAGLE CLAW CT.
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:

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: ZAMEER RASHID VP 03/09/2005