2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000085566

ANTUNES, MARCELLO

1401 SUGAR CANE DR

KISSIMMEE, FL 34759

GIRALDELLI, JOSEFA

KISSIMMEE, FL 32821

() Delete

11500, WESTBROOK #1027

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FILED Feb 27, 2006 Secretary of State

Entity Name: STAR SURFACE SOLUTION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1404 SUGAR CANE DR KISSIMMEE, FL 34744 **Current Mailing Address: New Mailing Address:** 1401 SUGAR CANE DR KISSIMMEE, FL 34744 FEI Number: 86-1107569 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: DE MEDEIROS, FABIO 1401 SUGAR CANE DR KISSIMMEE, FL 34744 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DE MEDEIROS, FABIO Name: Name: 1401 SUGAR CANE DR Address: Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: Title: VSD Title: () Delete () Change () Addition Name: AMARO, MELISSA R Name: 1401 SUGAR CANE DR Address: Address: KISSIMMEE, FL 34744 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: MELISSA AMARO **VSD** 02/27/2006

() Change () Addition