

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

04 MAY 11 PM 12:59

DOCUMENT # P96000073102

1. Entity Name
STAR TRADER INVESTMENTS, INC.



Principal Place of Business
14225 SW 103RD CT.
MIAMI, FL 33176

Mailing Address
14225 SW 103RD CT.
MIAMI, FL 33176

DO NOT WRITE IN THIS SPACE



03042003 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0690698

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GUERRA, SANDRA A
13780 SW 56TH STREET
SUITE 230
MIAMI, FL 33175

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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
Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PINTO, HIPOLITO P
STREET ADDRESS 14225 SW 103RD COURT
CITY-ST-ZIP MIAMI, FL

TITLE VD
NAME DE PINTO, CARMEN C
STREET ADDRESS 14225 SW 103RD COURT
CITY-ST-ZIP MIAMI, FL 33176

TITLE TD
NAME PINTO, CLAUDIA
STREET ADDRESS 14225 SW 103RD COURT
CITY-ST-ZIP MIAMI, FL 33176

TITLE SD
NAME PINTO, JULIAN
STREET ADDRESS 14225 SW 103RD COURT
CITY-ST-ZIP MIAMI, FL 33176

TITLE D
NAME PINTO, BIBIANA
STREET ADDRESS 14225 SW 103RD COURT
CITY-ST-ZIP MIAMI, FL 33176

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

800037044028
05/24/04--01066--009 **158.75

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12. 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 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 empowered 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/07/04
Date

Daytime Phone #