

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014203

FILED
Apr 07, 2009
Secretary of State

Entity Name: STAR VALET PARKING & TRANSPORTATION, INC.

Current Principal Place of Business:

7940 GLADES RD
BOCA RATON, FL 33434

New Principal Place of Business:

5970 S.W. 18TH STREET
BOCA RATON, FL 33433

Current Mailing Address:

7940 GLADES RD
BOCA RATON, FL 33434

New Mailing Address:

5970 S.W. 18TH STREET
E1 P.O. BOX 107
BOCA RATON, FL 33433

FEI Number: 65-0818835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAKIZLI, SUALP
7940 GLADES RD
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

SAKIZLI, SUALP
5970 S.W. 18TH STREET
E1 #107
BOCA RATON, FL 33433 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: SUALP SAKIZLI

04/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAKIZLI, SUALP
Address: 5970 SW 18TH STREET E-1 PMB 107
City-St-Zip: BOCA RATON, FL 33433

Title: SD () Delete
Name: AYEL, VOLKAN
Address: 5970 SW 18TH STREET E-1 PMB 107
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: SUALP SAKIZLI

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date