

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Jul 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000079841 1. Entity Name STARR MARINECORP, INC.	
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Principal Place of Business
**3137 NE 40TH CT
FT LAUDERDALE, FL 33308**Mailing Address
**3137 NE 40TH CT
FT LAUDERDALE, FL 33308****DO NOT WRITE IN THIS SPACE**

07082004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0901125Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GENNETT, DAVID
3137 NE 40TH CT
FT LAUDERDALE, FL 33308****DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent's signature required when reappointing)

DATE

**FILE NOW! FEE IS \$150.00
Due by September 8, 2004**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fee**In accordance with s. 607.183(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GENNETT, DAVID
STREET ADDRESS	3137 NE 40TH CT
CITY - ST - ZIP	FORT LAUDERDALE, FL 33308

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:

David C. Genett David C. Genett 7-12-04 9545647771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #