

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K12565

**Entity Name:** STAR-DAVID CAB, INC.

**Current Principal Place of Business:**

2315 NE 194TH STREET  
NORTH MIAMI BEACH, FL 33180

**Current Mailing Address:**

2315 NE 194TH STREET  
NORTH MIAMI BEACH, FL 33180

**FEI Number:** 65-0166770

**Certificate of Status Desired:** No

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

ITZHAK BACHAR, P.A.  
1400 N.E. MIAMI GARDENS DRIVE  
SUITE 219  
MIAMI, FL 33179 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

**Officer/Director Detail :**

Title            PDS  
Name            BACHAR, ROZA  
Address        2315 NE 194TH STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33180

Title            VPD  
Name            BACHAR, SHARON  
Address        2315 NE 194TH STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33180

*I hereby 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 all other like empowered.*

**SIGNATURE:** ROZA BACHAR

PDS

02/07/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date