Entity Name: STAR BALLROOM, INC.		Secretary of State CC2360472527	
2305-09 EAST	ncipal Place of Business: ATLANTIC BOULEVARD ACH, FL 33062		662300472327
Current Mai	ling Address:		
	ST ATLANTIC BOULEVARD BEACH, FL 33062		
FEI Number: 65-0686645		Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:		
	Y ATLANTIC BOULEVARD ACH, FL 33062 US		
The above name	d entity submits this statement for the purpose of changing its re	aistered office or reais	tered agent, or both in the State of Elorida
		giotoroa orrido orridgio	lereu agent, or both, in the State of Fionda.
SIGNATURE		giotorea emoc er regio	04/01/2017
SIGNATURE			
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent	goorou onico or rogo	04/01/2017
	Electronic Signature of Registered Agent	Title	04/01/2017
Officer/Dire	E: JODY DANCER Electronic Signature of Registered Agent		04/01/2017 Date
Officer/Dire Title	Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR	Title	04/01/2017 Date
Officer/Dire Title Name	E: JODY DANCER Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR DONALDSON, KAREN	Title Name	04/01/2017 Date DIRECTOR KENDZIA, JOAN 2305-09 EAST ATLANTIC BOULEVARD
Officer/Dire Title Name Address	E JODY DANCER Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR DONALDSON, KAREN 2305-09 EAST ATLANTIC BOULEVARD	Title Name Address	04/01/2017 Date DIRECTOR KENDZIA, JOAN 2305-09 EAST ATLANTIC BOULEVARD
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR DONALDSON, KAREN 2305-09 EAST ATLANTIC BOULEVARD POMPANO BEACH FL 33062	Title Name Address	04/01/2017 Date DIRECTOR KENDZIA, JOAN 2305-09 EAST ATLANTIC BOULEVARD
Officer/Dire Title Name Address City-State-Zip: Title	E JODY DANCER Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR DONALDSON, KAREN 2305-09 EAST ATLANTIC BOULEVARD POMPANO BEACH FL 33062 PRESIDENT, TREASURER, DIRECTOR	Title Name Address	04/01/2017 Date DIRECTOR KENDZIA, JOAN 2305-09 EAST ATLANTIC BOULEVARD

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: KAREN DONALDSON

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000065760

FILED Apr 01, 2017

Secretary of State