

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90176 028 ***150.00

DOCUMENT # F00000006983 1. Entity Name STAR EDITORIAL, INC.			
Principal Place of Business 1000 AMERICAN MEDIA WAY, SUITE A BOCA RATON, FL 33464		Mailing Address 190 CONGRESS PARK DR, SUITE 200 DELRAY BEACH, FL 33445	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 1000 AMERICAN MEDIAWAY Suite, Apt. #, etc.	
City & State Boca Raton, FL		4. FEI Number 59-2719233	
Zip 33464-1000		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD PECKER, DAVID 5401 N.W. BROKEN SOUND BLVD. BOCA RATON, FL 33487	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD PECKER, DAVID 1000 AMERICAN MEDIA WAY BOCA RATON, FL 33464-1000 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MILEY, JOHN 5401 N.W. BROKEN SOUND BLVD. BOCA RATON, FL 33487	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SEIDEN, MINDY 1000 AMERICAN MEDIA WAY BOCA RATON, FL 33464-1000 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS KAHANE, MIKE 5401 NW BROKEN SOUND BLVD. BOCA RATON, FL 33487	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KAHANE, MIKE 1000 AMERICAN MEDIA WAY BOCA RATON, FL 33464-1000 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE ATTACHMENT FOR ADDITIONAL DIRECTORS <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:		MINDY SEIDEN 4/29/05 (561)997-7733	

ATTACHMENT

20055923

#F00000006983

Star Editorial, Inc.
FEI Number 59-2719233
Directors

David J. Pecker	PCD
Austin Beutner	D
Anthony DiNovi	D
Neeraj Mital	D
Soren Oberg	D
Michael Neil Garin	D

Address

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Boca Raton, FL 33464-1000