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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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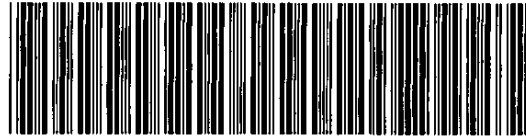
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

2006 JUL 5 2006

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Starlight Export Finance, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Alexandra de la Asuncion, Esq.
(Name of Person)
Law Offices
(Firm/Company)
16969 NW 67th Avenue, Suite #200,
(Address)
Miami FL 33015
(City/State and Zip code)

For further information concerning this matter, please call:

Alexandra Asuncion at (305) 531-0560
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. STRAIGHT EXPORT FINANCE, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Puerto Rico 3. 66-062 7780
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 9 - 2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 1/1/2006
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4444 SW 67 AVE. MIAMI FL 33155
(Principal office address)

4995 NW 72 AVE MIAMI FL 33166
(Current mailing address)

8. BUSINESS
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Roberto Trujillo

Office Address:

4995 NW 72 AVE Suite 205

MIAMI

(City)

, Florida 33166

(Zip code)

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10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ROBERTO TRAPAGA

Address: 4444 SW 67 AVE - 33ND MIAMI FL

Vice President: _____

Address: _____


Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. ROBERTO TRAPAGA PRESIDENT

(Typed or printed name and capacity of person signing application)



**COMMONWEALTH OF PUERTO RICO
DEPARTMENT OF STATE
SAN JUAN, PUERTO RICO**

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TALLAHASSEE, FLORIDA

*I, **GRICEL FALGÁS RODRÍGUEZ**, Acting Director of the Registry of Corporations of the Department of State of the Commonwealth of Puerto Rico,*

***CERTIFY:** That, pursuant to the provisions of the Article 15.01 of the General Corporation Law of 1995, "**STARLIGHT EXPORT FINANCE, INC.**", file number **137,038**, a profit Corporation, organized under the laws of Puerto Rico, has complied with the filing of Annual Reports; therefore, it is in good standing.*

***IN WITNESS WHEREOF**, I sign the present and cause to be affixed on it the Great Seal of the Commonwealth of Puerto Rico, in the City of San Juan, today, June twenty of the year two thousand and six.*



*Grisel Falgás Rodríguez
Acting Director
Register of Corporations*

GFR/ara
0335074
\$10.00

Certification of the Annual Reports Officer

I hereby certify that I have read and revised the aforementioned corporate record and that it complies with Chapter XV, Article 15.01 of the General Corporations Law.

6/20/2006
Date

Anilda Lesario
Annual Reports Officer

**Commonwealth of Puerto Rico
CERTIFICATE OF INCORPORATION
A STOCK CORPORATION**

03 JUL -9 PM 3:50

FIRST: The name of the corporation is: **STARLIGHT EXPORT FINANCE, INC.** (with "Corporation", "Incorporation", "Corp.", "Inc." at the end)

SECOND: Its designated office in the Commonwealth of Puerto Rico will be located at (mailing and physical address, including street, number and municipality)

Postal:

PO BOX 195537
SAN JUAN, PR 00919-5537

Physical:

STREET 1, CORNER OF RD. 165
REXCO INDUSTRIAL PARK
CANADA LIFE PLAZA, SUITE #3
GUAYNABO, PR 00969

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TALLAHASSEE, FLORIDA

The Resident Agent in charge of said office is AGUSTIN CABRER

THIRD: The nature of the business or purposes of the corporation are:
All purposes authorized by law.

FOURTH: The number and classes of authorized capital stock of this corporation are (indicate par value of shares or if they have no par value)

500 shares of common stock with a par value of \$ 1 for each share

500 shares of preferred stock with a par value of \$ 1 for each share

The denomination, faculties, preferences and rights of the stock will be fixed by the Board of Directors by corporate resolution.

FIFTH: The name and mailing and physical address (including street, number and municipality) of each incorporator are

Name: ZAIDA MONTALVO DIAZ

Postal:

105 ARTERIAL HOSTOS
BOX 190
SAN JUAN, PR 00918

Physical:

105 ARTERIAL HOSTOS
APT. S-402
SAN JUAN, PR 00918

SIXTH: If the faculties of the incorporators will end upon the filing of the certificate of incorporation, the names and addresses (including street, number and municipality) of the persons who will act as directors until the first annual meeting of the stockholders or until their successors replace them are:

AGUSTIN CABRER
STREET 1, CORNER OF RD. 165
REXCO INDUSTRIAL PARK
CANADA LIFE PLAZA, SUITE #3
GUAYNABO, PR 00969

ROBERTO TRAPAGA
STREET 1, CORNER OF RD. 165
REXCO INDUSTRIAL PARK
CANADA LIFE PLAZA, SUITE #3
GUAYNABO, PR 00969

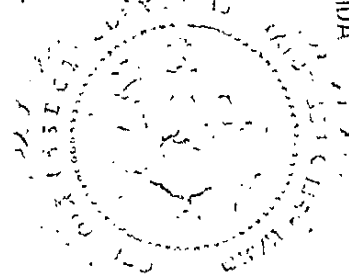
Please indicate with an "X" the date on which the corporation will be effective:

_____ the filing date

_____ the following date _____ which will not exceed ninety (90) days from the filing date

I/We, the undersigned, being the incorporator(s), hereinbefore named, for the purpose of forming a corporation pursuant to the General Corporation Law of Puerto Rico of 1995, hereby swear that the facts herein stated are true, this 9 day of JULY, 2003.

Incorporator(s)



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