2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

F98000004551

1. Entity Name

STARMEDIA NETWORK, INC.



FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90496 007 ***150.00

Principal Place of Business STARMEDIA NETWORK. INC. 29 WEST 36 ST 3RD FL NEW YORK NY 10018

Mailing Address STARMEDIA NETWORK, INC. 29 WEST 36 ST 3RD FL NEW YORK NY 10018

2. Principal Place of Business GGG Bruckel Are Suite, Apt. #, etc. 900 City & State Mann FL Country 3131 Cou
City & State Wham FL City & State Wham FL Country 33131 Country 4. FEI Number 06-1461770 Applied For Not Applicable Country 33131 Country 5. Certificate of Status Desired Fee Required Fee Required 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 7. City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME LOZANO-STICKLEY, ANA MARIE 1 Delete 1 TILE NAME 1 DOZANO-STICKLEY, ANA MARIE 2 Addition Addition Addition Applied For Not replication File NAME 1 DOZANO-STICKLEY, ANA MARIE 2 Addition Applied For Not replication File Applied For Not replication of State Appl
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TITLE V Defete TITLE V Defete Addition
NAME HARTMAN, MICHAEL STREET ADDRESS 29 W 36 ST HARTMAN, MICHAEL STREET ADDRESS 3,5,5 Brickell Ave
STREET ADDRESS 29 W 36 ST STREET ADDRESS 344 Brickell Ave

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 impowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 Jmuny WVZ
Date Property 938

CR2E034 (10/02)