

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J66432

Entity Name: STAHARIT, INC.

FILED
Feb 01, 2007
Secretary of State**Current Principal Place of Business:**241 OMAHA ST. COUNTY ROAD 1
PALM HARBOR, FL 34683**New Principal Place of Business:****Current Mailing Address:**241 OMAHA ST. COUNTY ROAD 1
PALM HARBOR, FL 34683**New Mailing Address:**

FEI Number: 59-2927514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:FRATICELLI, H C
241 OMAHA ST
PALM HARBOR, FL 34683 US**Name and Address of New Registered Agent:**RICHERT, DAVID A
241 OMAHA ST
PALM HARBOR, FL 34683 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: DAVID A. RICHERT

02/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PRES () Delete
Name: FRATICELLI, H C
Address: 241 OMAHA ST
City-St-Zip: PALM HARBOR, FL 34683Title: DIR () Delete
Name: TRIAS, DANA
Address: 614 FAIROAKS DR.
City-St-Zip: TARPON SPRINGS, FL 34689Title: VP () Delete
Name: RICHERT, DAVID
Address: 1201 SOUTH M STREET
City-St-Zip: LAKE WORTH, FL 33460Title: SEC () Delete
Name: MCMILLAN, JULIE
Address: 1201 SOUTH M STREET
City-St-Zip: LAKE WORTH, FL 33460Title: TRES () Delete
Name: SORGENTE, GIANLUCA
Address: 5719 LA GORCE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: OFFI (X) Change () Addition
Name: TRIAS, HARRIET A
Address: 241 OMAHA ST
City-St-Zip: PALM HARBOR, FL 34683Title: DIR (X) Change () Addition
Name: HARRISON, DANA
Address: 614 FAIROAKS DR.
City-St-Zip: TARPON SPRINGS, FL 34689Title: PRES (X) Change () Addition
Name: RICHERT, DAVID
Address: 1201 SOUTH M STREET
City-St-Zip: LAKE WORTH, FL 33460Title: TRES (X) Change () Addition
Name: MCMILLAN, JULIE
Address: 1201 SOUTH M STREET
City-St-Zip: LAKE WORTH, FL 33460Title: VP (X) Change () Addition
Name: SORGENTE, GIANLUCA
Address: 5719 LA GORCE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DANA HARRISON

DIR

02/01/2007

Electronic Signature of Signing Officer or Director

Date