

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 20, 2006 08:00 AM
Secretary of State**

DOCUMENT # N04000006790

1. Entity Name
BOCA STARZ, INC.



Principal Place of Business
**2701 W OAKLAND PARK BLVD - STE 100
FT LAUDERDALE, FL 33311**

Mailing Address
**2701 W OAKLAND PARK BLVD - STE 100
FT LAUDERDALE, FL 33311**



01122006 No Chg-NP CR2E037 (11/05)

4. FEI Number
42-1637836

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RETAMAR, RICHARD E ESQ
RETAMAR LAW FIRM, P.A.
823 E HILLSBORO BLVD
DEERFIELD BEACH, FL 33441**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SLOOTSKY, STEVEN
STREET ADDRESS	2701 W OAKLAND PARK BLVD - STE 100
CITY-ST-ZIP	FT LAUDERDALE, FL 33311
TITLE	VPD
NAME	LIBERTY, PHIL
STREET ADDRESS	21000 BOCA RIO RD - STE C1
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	SD
NAME	JACOBS, PAUL
STREET ADDRESS	1098 NW BOCA RATON BLVD
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	TD
NAME	RETAMAR, RICHARD E
STREET ADDRESS	823 E HILLSBORO BLVD
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/06
Date

954-764-7377
Daytime Phone #