

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004599

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** ABOVE THE STARS FOUNDATION, INC.

**Current Principal Place of Business:**

929 LONGDALE DR.  
101  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

929 LONGDALE DR.  
101  
LONGWOOD, FL 32750

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KHORRAMIAN, AZAD  
2044 ALAQUA DR.  
LONGWOOD, FL 32779      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: KHORRAMIAN, AZAD  
Address: 2044 ALAQUA DR.  
City-St-Zip: LONGWOOD, FL 32779 US

Title: P  
Name: ONRIQUE, ARCHIE L  
Address: 1811 LOCHSHYRE LOOP  
City-St-Zip: OCOEE, FL 34761 US

Title: SEC  
Name: MARCHANTE, ANTHONY  
Address: 249-41 148TH AVE  
City-St-Zip: ROSEDALE, NY 11422 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ONRIQUE ARCHIE

MR

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date