## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 26, 2005 08:00 AM **DOCUMENT # P00000009179 Secretary of State** 1. Entity Name STAR TECH AUTOMOTIVE, INC. Principal Place of Business Mailing Address 37644 US 19 N 37644 US 19 N PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 No Chg-P CR2E034 (10/03) 02202005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3621972 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHITE, GARY DO NOT WRITE 1363 WILLIAMS DRIVE CLEARWATER, FL 33764 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. DATE (NOTE, Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 U00000276815 03/26/05-80004-011 150<u>.0</u>0 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME WHITE, GARY 1363 WILLIAMS DRIVE STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33764 WHITE, CINDY NAME 1363 WILLIAMS DRIVE STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33764 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP lied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if I hereby certify that the information sup indicated on this report or supplement of the corporation or the receiver of the changed, or on an attachn SIGNATURE:

ICER OR DIRECTOR

FILED