2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100028905 1. Entity Name STARLITE PROMOTIONAL COMPANY, INC.					Secretary of State 04-18-2002 90420 021 ***150.00			
Principal Plac 10332 HARBO CORAL SPRIN	R INN CT	Mailing Address 10332 HARBOR INN CT CORAL SPRINGS FL 33071) (ARIOTAL AN CANTAL ANGUL ANGUL A	III OOTII SEIIO IIOSI KOINO IOIK	E8181 8111 1081	
Suite, Apt.		3. Mailing Address 1201 NE 33rd Street Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
Zip	no Beach, FL Country		ountry _		FEI Number 65-109371	/ No.	pplied For ot Applicable ditional	
3306		33064	USA		Certificate of Status Desired Name and Address of New F	Fee Require		
		G	Name	<u></u>		<u> </u>		
MESSANO, DEBORAH 10332 HARBOR INN CT				Street Address (P.O. Box Number is Not Acceptable)				
CORAL SPRINGS FL 33071			1201 NE 33rd Street					
	1201 NE 33rd Street City Pompono Beach FL Zip Code 64							
8. The above	named entity submits this statement for	the purpose of changing its regis						
SIGNATURE .	Signature, typed or printed name of registered agent ar	, 2000	NESSO stered Agent signatu		einstating)	4-5-02 DATE		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FE After May 1, 2002 Fo Make Check Payable to			ee will be \$5	50.00	10. Election Campaign Fir Trust Fund Contribution		00 May Be d to Fees	
11.	OFFICERS AND E		12.	ΑC	DDITIONS/CHANGES TO OFF			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MESSANO, DEBORAH 10332 HARBOR INN CT CORAL SPRINGS FL 33071		TITLE NAME STREET ADDRESS CITY-ST-ZIP	1201 Pompo	NE 33 ^{rel} stre 200 Beach, FL	™ Change et 33064	☐ Addition {	
TITLE NAME STREET ADDRESS		3000	TITLE NAME STREET ADDRESS CITY-ST-ZIP	, , , , , ,		☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME		Delete	TITLE NAME	- S	र ए केन्स पत्र इंट	Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADORESS CITY-ST-ZIP			☐ Change	☐ Addition	
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address w	true and accurate and that my sig wered to execute this report as re	gnature shall ha	ave the same	legal effect as if made under	oath; that I am an officer	r or director	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR