## P01000081324

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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DIVISION OF CORPORATIONS

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## Joshua D. Bash, Esq.

SUITE 304 AVENTURA CORPORATE CENTER 20801 BISCAYNE BOULEVARD MIAMI, FLORIDA 33180-1422

Joshua D. Bash Jack M. Bash (1917–1982)

DADE: 305-940-1200 DADE: 305-682-0400 BROWARD: 954-922-1400

FAX: 305-682-1800

e-mail: joshbash@bellsouth

January 6, 2006

Secretary of State
Division of Corporations
P.O.B. 6327
Tallahassee, FL. 32314

Re: Star Lux, Inc. Statement of Change, etc.

Dear Sir/Madam:

Enclosed please find my check in the sum of \$35.00 and an original and one copy of the Statement of Change of Registered Office for the filing fee and a copy of the above for the above-named Corporation.

Please return a date stamped copy of the form to the undersigned.

Please call if you have any questions with regards hereto.

Thank you for your anticipated cooperation herein.

Ver∯ truly yours,

OSHUA D. BASH, ESQ.

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Enclosures

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| •  | t 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of Florida   |    |
|--|--|----|
|  | ered office or registered agent, or both, in the State of Florida.   |    |
| 1. The name of the corporation:  | STAR LUX, INC.   | _, |
| 2. The principal office address:   | 400 South Dixie Hwy. #4  | _  |
| 2 M 112 44 (16 3160 1)   | Hallandale Beach, FL. 33009  | _  |
| 3. The mailing address (if different):   | DREIG  | _  |
| 4. Date of incorporation/qualification   | : 8/15/01 Document number: P01000081324  | _  |
| <ol><li>The name and street address of the<br/>Florida Department of State:</li></ol>  | current registered agent and registered office on file with the  |    |
| LUIS FA  |  | Ç  |
| 8028 NW  | 66th Street, Miami, Fr. 33166  | 0  |
| <ol><li>The name and street address of the<br/>(if changed):</li></ol>   | new registered agent (if changed) and /or registered office  |    |
| ROGER B  | GDADI ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~  |    |
| 400 S. 1   | ixie Hwy., Hallandale Beach, FL. 33009 P.O. Box NOT acceptable)  |    |
| The street address of its registered as changed will be identical.   | ffice and the street address of the business office of its registered agent,   |    |
| Such change was authorized by res<br>authorized by the board, or the corp  | dution duly adopted by its board of directors or by an officer so oration has been notified in writing of the change.  |    |
| ROGER BAGBAGICTOR  | PRESIDENT (Printed or typed name and title)  |    |
| I hereby accept the appointment as I further agree to comply with the post my duties, and I am familiar will document is being filed merely to recorporation has been notified in wr | registered agent and agree to act in this capacity, ovisions of all statutes relative to the proper and complete performance and accept the obligation of my position as registered agent. Or, if this flect a change in the registered office address, I hereby confirm that the ting of this change. |    |
| 1  | 12/06/05   |    |
| ROGER BAGDAD   | (Date)   |    |
| If signing on behalf of an entity.   |  |    |
| ROGER BAGNA  | $\Delta_{i}$   |    |
| (Typed or Printed Name)  | <del></del>  |    |

\* \* \* FILING FEE: \$35.00 \* \* \*