2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 17, 2006 8:00 am **Secretary of State DOCUMENT # P02000000544** 01-17-2006 90232 020 ***150.00 1. Entity Name STAR COMMUNICATIONS ENTERPRISES, CORP. Principal Place of Business Mailing Address 60001931 1251 RICHMOORE CIRCLE 104 RIVER CHASE DR ORLANDO, FL 32807 ORLANDO, FL 32807 3. Mailing Address 2. Principal Place of Business Chase Di Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 01132006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For \mathcal{T} 95-4593478 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired **3**580+ USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Sved Sadullah SYED, SADULLAH Street Address (P.O. Box Number is Not Acceptable) 1251RICHMOORE CIRCLE ORLANDO, FL 32807 Chase City 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME SYED, SADULLAH NAME 104 RIVER CHASE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32807 CITY-\$1-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

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 607, 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.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

IE OF SIGNING OFFICER OR DIRECTOR

01/13/06 407-234-63

FILED