


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 03, 2004 8:00 am
Secretary of State

06-03-2004 90004 016 ***150.00

DOCUMENT # P02000040847

1. Entity Name
STARKS & STARKS PRODUCTIONS, INC.



Principal Place of Business
**3600 S STATE RD 7
SUITE 340
MIRAMAR, FL 33023**

Mailing Address
**P.O. BOX 693421
MIAMI, FL 33269**

54056585



05132004 Chg-P CR2E034 (10/03)

2. Principal Place of Business
Miramar, Florida

3. Mailing Address
3600

Suite, Apt. #, etc.
Suite 47

City & State
Miramar, FLA

Zip
33023

Country

4. FEI Number
03-0391785

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**STARKS, ROBIN R
3600 S STATE RD 7
SUITE 340
MIRAMAR, FL 33023**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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  DATE **5/20/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO STARKS, ROBIN R 3600 S STATE RD 7, STE 340 MIRAMAR, FL 33023	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:  DATE **5/20/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

54056585

STARKE & STARKE PRODUCTIONS, INC.

P02000040847

3600 S. State Rd 7
Suite 47
Miramar, Florida 33023

Phone 954-322-9001
Fax 305-652-6017
Email ssproductions@att.net

May 09, 2004

Department of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir/Ma'am,

Please note I did not receive my renewal form again this year. If you could please provide me with information on how this can be avoided in the near future. Enclosed I have provided the payment in the amount of \$150.00. for the Annual Fee.

If there are any questions please give me a call at 954-322-9001 or 305-738-2393.

Thank you,



Robin Starks

Starks & Starks Productions, Inc.

Attachment

54056585-

P02000046847

3600 S State Rd 7
Suite 47
Miramar, Florida 33023
USA

Phone 954-322-9001
Fax 305-652-6017
Email ssproductions@att.net

May 20, 2004


Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302

Dear Sir/Ma'am,

I did not receive the Annual Report therefore I sent in the payment without it. Upon expectancy of this form I did return it along with the payment originally sent. Please except this payment.

Your expectancy in this matter is greatly appreciated.

Thank you,


Robin Starks