

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90463 028 ***158.75

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000062825

1. Entity Name
STARMOSAIC, INC.



Principal Place of Business
141 CRANDON BLVD. #429
KEY BISCAYNE, FL 33149

Mailing Address
141 CRANDON BLVD. #429
KEY BISCAYNE, FL 33149

90051923

2. Principal Place of Business
5351 CONGO COURT.
Suite, Apt. #, etc.

3. Mailing Address
5351 CONGO COURT
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
CAPE CORAL, FL

City & State
CAPE CORAL, FL

4. FEI Number
04-3689263

Applied For
Not Applicable

Zip
33904

Country
USA

Zip
33904

Country
USA

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

6. Name and Address of Current Registered Agent

GOMEZ, CESAR ESQ.
260 CRANDON BOULEVARD
UNIT 14
KEY BISCAYNE, FL 33149

7. Name and Address of New Registered Agent

Name
CYRIL J. BUDDE, JR.

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

5351 CONGO COURT

City
CAPE CORAL

FL

Zip Code
33904

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

MARCH 4, 2003

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

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
PSD
SCHUPPE, RAPHAEL
141 CRANDON BLVD. #429
KEY BISCAYNE, FL 33149 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SCHUPPE, RAPHAEL
5351 CONGO COURT
CAPE CORAL, FL 33904 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CYRIL J. BUDDE, JR.
5351 CONGO COURT
CAPE CORAL FL 33904 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARCH 4, 2003

CR2E034 (10/02)