

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000070537

1. Entity Name
STARUSTA PROPERTIES, INC.

Principal Place of Business

2035 STONINGTON TER
W PALM BCH, FL 33411

Mailing Address

2035 STONINGTON TER
W PALM BCH, FL 33411

FILED
05 AUG -1 PM 12:28
SEVENTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA



07112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 01-0753653 Applied For: Not Applicable

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

8. Name and Address of Current Registered Agent

STARUSTA, HARRIET
2035 STONINGTON TER
W PALM BCH, FL 33411DO NOT WRITE
IN THIS SPACE

6. 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: *Harriet Starusta* Harriet Starusta

Signature, typed or printed name of registered agent, and also I appoints

(NOTE: Registered Agent signature required when resigning)

DATE

July 14/05

FILE NOW!!! FEE IS \$550.00
Due by September 7, 20059. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

STARUSTA, PEREZ

2035 STONINGTON TER

W PALM BCH, FL 33411

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

ST

STARUSTA, HARRIET

2035 STONINGTON TER

W PALM BCH, FL 33411

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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IN THIS SPACE

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: *Perez Starusta* Perez Starusta

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

July 14/05 561 791 2513



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 515545 4336650

AUTHORIZATION :

Patricia Piquero

COST LIMIT : \$ 558.75

ORDER DATE : August 1, 2005

ORDER TIME : 9:40 AM

ORDER NO. : 515545-005

CUSTOMER NO: 4336650

CUSTOMER: Ms. Michelle E. Smith
Baker & McKenzie
Suite 1700
1111 Brickell Avenue
Miami, FL 33131

ANNUAL REPORT FILING

NAME: STARUSTA PROPERTIES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan-EXT#2955

EXAMINER'S INITIALS: _____

RECEIVED
05 AUG - 1 AM 10:55
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA