PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P02000110760 **DOCUMENT #**

1. Corporation Name

STAR BROADCASTING INC.

Principal Place of Business

Mailing Address

21 MIRACLE STRIP PARKWAY

21 MIRACLE STRIP PARKWAY

FILED

03 NOV -3 AM 10: 16

SECRETARY OF STATE TALLAHASSEE, FLORIDA



FT-WALTON BEACH FL 32545	LTON BEACH FL 32545 FT WALTON BEACH FL 32545			E NECHOLA III BONG IIAN BONG BONG BONG BONG BONG INGG NAGA BONG BONG BONG BONG INGG		
If above addresses are incorrect in any way, line th	rounh incorrect ir	oformation and enter	r correction helow.	REIN	STATEMENT	07
New Principal Office Address, If Applicable				4. Date Incorp	orated or Qualified	
Suite, Apt. #, etc. Suite, Apt. #		etc.		OCC /	Business in Florida 2 10/.14/2002	
CA 1/2		5. FEI Nur		5. FEI Number		
City & State		7" 35		35~	2/8 5 2 8 8 Not Applicable	
ZipCountry	Zip— ——	-Gount	ry	6. CERTIFICATE		dditional Fee required Certificate of Status
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)						
Title(s) Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip	
D HALE, RONALD E JR	HALE, RONALD E JR		21 MIRACLE STRIP PARKWAY		FT WALTON BEACH FL 32545	
D HALE, JAMES F		21 MIRACLE STRIP PARKWAY			FT WALTON BEACH FL 32545	
D HALE, RONALD E-SR		21-MIRACLE STRIP-PARKWAY			FI WALION BEACH FL 32545	
D HALE, JENNifor F 21 Miracle STrip PE FT WAlton Bel						Beh Pl. 52548
			1	900023750889 10/13/0301069015 **150.00		
8. Name and Address of Current Registered Agent				Name and Address of New Registered Agent		
	Name					
HALE, RONALD E JR 21 MIRACLE STRIP PARKWAY			Street Address (P.O. Box Number is Not Acceptable)			
FT_WALTON:BEACH_FL-32545			Suite, Apt. #, Etc.			27
			City	· / <u>-</u> .	State Zi	p Code
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.						
Signature of Registered Agent Outline	EGISTERED AG	ENT MUST SIGN		<u>_</u>	Date 10/10/03	
11. I certify that I am an officer or director or the rece this reinstatement application, the reason for diss						



Glenda E. Hood, Sec. Of State Florida Dept. Of State Division Of Coporations P.O. Box 6327 Tallahassee, Fl. 32314

Dear Mrs. Hood,

Attached is a renewal check for Corporation renewal for Star Broadcasting, Inc. We are a new startup company and have had no activity in the prior year, consequently we do not have an annual report yet.

The first two forms did not reach me as my name is not part of the address. Please include my name in the address so this will not happen in the future. Thank you for your attention in this matter.

Sincerely,

Ronald E. Hale, Jr.

President

Star Broadcasting, Inc.