

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000047649

FILED
Feb 11, 2005
Secretary of State**Entity Name:** STELLAR MANAGEMENT CORPORATION**Current Principal Place of Business:**19837 NW 2 AVE
MIAMI, FL 33169**New Principal Place of Business:****Current Mailing Address:**19839 NW 2 AVE
MIAMI, FL 33169**New Mailing Address:****FEI Number:** 04-3755085**FEI Number Applied For** ()**FEI Number Not Applicable** ()**Certificate of Status Desired** (X)**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: ROSE, JAMES M
Address: 19839 NW 2 AVE
City-St-Zip: MIAMI, FL 33169**Title:** D () Delete
Name: HICKMORE, NORMAN
Address: 19839 NW 2 AVE
City-St-Zip: MIAMI, FL 33169**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES M ROSE

D

02/11/2005

Electronic Signature of Signing Officer or Director_____
Date