2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2004 8:00 am Secretary of State 04-29-2004 90215 038 ***150.00

DOCUMENT # P0300080564 1. Entity Name STAR BUILDING SERVICES, INC.									04-29-200			150.00	
Principal Place of Business Mailing Address						·			940	70813	1		
1822 CATTLEMAN DR. Brandon, FL 33511				1822 CATTLEMAN DR. Brandon, FL 33511									
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2. Principal Place of Business				3. Mailing Address				1 (881)(881) (1)	BRIDA IHIT BRIH BRIIT BRIH	ESTRI TELLI SELLI	BINE BINI BIE		
Suite, Apt. #, etc.			Su	ite, Apt. #, etc.			04212004	Chg-P	CR2E034	(10/03)			
City & State			City & State				ĺ	4. FEI Numbe	320387		├ ── `	plied For t Applicable	
Zip	Country		Zip	Zip Cour		^{ry} 5.		_	of Status Desired		B.75 Add e Required		
	6. Name	and Address of Current	Register	red Agent		Non-		- 7. Name and	Address of New Re	gistered Ag	ent		
LONDON, RODNEY F						Name							
1822 CATTLEMAN DR. BRANDON, FL 33511						Street Address (P.O. Box Number is Not Acceptable)							
DIANDON, 12 00011													
						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 Robert Agent 4/27/64													
·	Signature, typed	or purited pame of registered agent	and title if a	oplicable. (NOT	E: Registere	d Agent signature	e required	when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financia Trust Fund Contribution.							\$5. Add	00 May Be ed to Fees	•				
10.	OFFICERS AND D							ADDITIONS/	CHANGES TO OFFI			S IN 11	
TITLE Name	PD LONDON, RODNEY F			☐ Delete TITLE NAM			. ,			C	Change	Addition	
STREET ADDRESS				STRE									
CITY-ST-ZIP	BRANDON, FL 33511				CITY	'-ST-ZIP					,		
TITLE	VD			☐ Delete	E		•		[Change	☐ Addition		
name Street address	LONDON, ALISA 1822 CATTLEMAN DR.				EET ADDRESS		, .						
CITY-ST-ZIP		N, FL 33511		CITY	-ST-ZIP				·				
TITLE	STD			☐ Delete	TITE	Į.				[] Change	☐ Addition	
NAME STREET ADDRESS		I, VALERIE ITLEMAN DR.		a - ·	NAM STRI	EET ADDRESS		<u> </u>	=	•	•		
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CITY-ST-ZIP	!					(-ST-ZIP							
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STREET ADDRESS CITY+ST-ZIP						r-ST-ZIP							
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NAME					NAM	AE EET ADDRESS							
STREET ADDRESS CITY-ST-ZIP	1					Y-ST-ZIP							
12. hereby		ne information supplied wit											
indicated of the cor changed	on this repor- poration or to or on an att	ort or supplemental report in the receiver or trustee emp tachment with an address	s true an owered with all c	d accurate and that i to execute this report ther like empowered	my signa t as requ f	iture shall ha iired by Chap	oter 607	same legal effec 7, Florida Statute	as if made under o es; and that my name	ath; that I am appears in I	an officer Block 10 of	Block 11 if	