

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094667

FILED
Apr 13, 2007
Secretary of State

Entity Name: FLORIDA STAR SERVICES, INC.

Current Principal Place of Business:

1807 BELLA VISTA WAY
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

1807 BELLA VISTA WAY
PORT SAINT LUCIE, FL 34952

New Mailing Address:

FEI Number: 20-0185694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONFORME, JORGE
4936 SW 154TH CT.
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1261 EAST SAMPLE ROAD
POMPANO BEACH, FL 33064 US

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: TAX HOUSE CORPORATION

04/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: CONFORME, JORGE
Address: 1807 BELLA VISTA WAY
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP () Delete
Name: ABAD, WILLIAM
Address: 1807 BELLA VISTA WAY
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: S () Delete
Name: INTRIAGO, RITA PABLO
Address: 1807 BELLA VISTA WAY
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: ABAD, WILLIAM
Address: 1807 BELLA VISTA WAY
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP (X) Change () Addition
Name: PABLO, RITA C
Address: 1807 BELLA VISTA WAY
City-St-Zip: PORT SAINT LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: WILLIAM ABAD

P

04/13/2007

Electronic Signature of Signing Officer or Director

Date