## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000109895

Entity Name: STAR POWER INC.

FILED Mar 25, 2009 Secretary of State

| Current Principal Place of Business:           |                  |                              | New Principal Place of Business:             |  |
|--|------------------|------------------------------|--|--|
|  | KELL KEY DRIV    | E                            |  |  |
| SUITE 104<br>MIAMI, FL                         |                  |                              |  |  |
| Current Mailing Address:                       |                  |                              | New Mailing Address:                         |  |
|  | _                |                              | -  |  |
| 702 KING<br>SUITE 125                          | FARM BLVD.       |                              |  |  |
|  | LE, MD 20850     | US                           |  |  |
| FEI Number                                     | : 20-0430595     | FEI Number Applied For ( )   | FEI Number Not Applicable ( )                | Certificate of Status Desired ( )      |
| Name and                                       | d Address of C   | urrent Registered Agent:     | Name and Address of                          | of New Registered Agent:               |
| 1203 GOV<br>SUITE 101<br>TALLAHA:<br>The above | SSEE, FL 3230    | ARE BLVD<br>12960 US         | purpose of changing its registere            | d office or registered agent, or both, |
| SIGNATUI                                       | RE:              |                              |  |  |
|  | Electroni        | c Signature of Registered Ag | ent  | Date                                   |
| Election Ca                                    | mpaign Financing | Trust Fund Contribution ( ). |  |  |
| OFFICERS AND DIRECTORS:                        |                  |                              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:    | CACERES, GEO     | BLVD. SUITE 125              | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip:    | CACERES, GEO     | BLVD. SUITE 125              | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip:    | PALANCE, MICH    | BLVD. SUITE 125              | Title:<br>Name:<br>Address:<br>City-St-Zip:  | () Change () Addition                  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:    | PALANCE, MICH    | BLVD. SUITE 125              | Title:<br>Name:<br>Address:<br>City-St-Zip:  | () Change () Addition                  |

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL PALANCE V 03/25/2009