2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secrétary of State 07-21-2005 90030 022 ***158.75 DOCUMENT # P0400007325 STAR DELTA FRAMING, INC. Principal Place of Business Mailing Address 615 KING STREET **615 KING STREET** 50056729 EUSTIS, FL 32726 EUSTIS, FL 32726 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07122005 CR2E034 (10/03) Chg-P Applied For City & State City & State 4. FEI Number 33i04 2880 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name :--CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change NAME KITCHEN, JOSHUA B NAME STREET ADDRESS 615 KING STREET STREET ADDRESS CITY-ST-ZIP EUSTIS, FL 32726 CITY-ST-7IP D TITLE ☐ Delete TITI F Change Addition NAME POLANCO, ROBERT S STREET ADDRESS 5148 EAST WING DRIVE STREET ADDRESS ORLANDO, FL 32819 CITY-ST-ZIP CITY-ST-ZIP D TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LAMBERT, SUMMER NAME STREET ADDRESS 615 KING STREET STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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FILED Jul 21, 2005 8:00 am



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 12, 2005

STAR DELTA FRAMING, INC. 615 KING STREET EUSTIS, FL 32726 US

SUBJECT: STAR DELTA FRAMING, INC. Ref. Number: P04000007325

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner Senior Section Administrator

Letter Number: 105A00046012