


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90058 014 ***150.00

DOCUMENT # P04000066705		
1. Entity Name STARSHINE PROPERTIES, INC.		
Principal Place of Business 1770 W 33 PLACE HIALEAH, FL 33012	Mailing Address 1770 W 33 PLACE HIALEAH, FL 33012	

40098713



2. Principal Place of Business - No P.O. Box # 1745 W. 33 PLACE Suite, Apt. #, etc.	3. Mailing Address 1745 W. 33 PLACE Suite, Apt. #, etc.
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04242007 Chg-P CR2E034 (12/06)

City & State HIALEAH, FL	City & State HIALEAH, FL
Zip 33012	Country U.S.A.

4. FEI Number 20-1538388	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MARCUS, ALAN K 1320 S DIXIE HWY STE 1045 CORAL GABLES, FL 33146

7. Name and Address of New Registered Agent Name ROGER ALTER Street Address (P.O. Box Number is Not Acceptable) 10001 W. OAKLAND PARK BLVD. SUITE 200 City FORT LAUDERDALE FL Zip Code 33351
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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 Roger Alter DATE 4/24/07
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete SENDON, CAROLINA 1770 W 33 PLACE HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete PUERTO, JAIME 1770 W 33 PLACE HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	UPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CAROLINA SENDON 1745 W. 33 PLACE HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JAIME PUERTO 1745 W. 33 PLACE HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: X JA 4-27-07 305-364-9952
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #