

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000084008

1. Entity Name
RIG STAR HOLDING, CORP.



Principal Place of Business

1401 NW 88 AVENUE
MIAMI, FL 33172

Mailing Address

1401 NW 88 AVENUE
MIAMI, FL 33172

FILED
Sep 02, 2008 08:00 AM
Secretary of State



08272008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1166487

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SHOMAR, JOSEPH
7777 NW 146 ST
MIAMI LAKES, FL 33016

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
ABBOUD, GHASSAN
1401 NW 88 AVENUE
MIAMI, FL 33172

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
ABBOUD, ROGER
1401 NW 88 AVENUE
MIAMI, FL 33172

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000958677
09/02/08-80001-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Chassan Aboud
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/27/08 305.471.7755
Date Daytime Phone #