

2005 FOR PROFIT CORPORATION ANNUAL REPORT

Filed. 7-5-05
#

FILED
05 OCT 19 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000117117

1. Entity Name
STAR IMAGE, INC.



Principal Place of Business
1631 S.W. 170TH ST.
NEWBERRY, FL 32669

Mailing Address
1631 S.W. 170TH ST.
NEWBERRY, FL 32669

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FINANCIAL STATEMENT
107052005 Chg-P. CF2E034 (10/03)

4. FEI Number

20-1696937

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TATUM, LOUANN
1631 S.W. 170TH ST.
NEWBERRY, FL 32669

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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

(NOTE: Registered Agent's signature required when changing)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TATUM, LOUANN
1631 S.W. 170TH ST.
NEWBERRY, FL 32669 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
07-08-05 90025 006 \$150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

EXPIRATION DATE

7-5-05 0352-492-0144

STAR IMAGE, INC.

October 17, 2005

Division of Corporation

Dear Sir or Madam:

We are writing about our profit corporation annual report. We never received our renewal notice. We went online and renewed on July 5, 2005. Therefore, the information was there on time. I was instructed by an operator to write this letter stating that we did send the information and mail it with the report. Please make your corrections on your end.

Sincerely,

A handwritten signature in cursive script that reads "Louann Tatum".

Louann Tatum
Owner