## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000076894

Entity Name: NORMA STAR CORP

FILED May 01, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**Current Principal Place of Business: New Principal Place of Business:** 

175 FOUNTAIN BLUE BLVD 175 FOUNTAINEBLEAU BLVD

1R12 1R12

MIAMI, FL 33176 MIAMI, FL 33172

**Current Mailing Address: New Mailing Address:** 

175 FOUNTAIN BLUE BLVD 175 FOUNTAINEBLEAU BLVD

1R12 1R12

MIAMI, FL 33176 MIAMI, FL 33172

FEI Number: 20-2900015 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARCIA, NORMA GARCIA, NORMA 175 FOUNTAIN BLUE BLVD 175 FOUNTAINEBLEAU BLVD 1R12

1R12 MIAMI, FL 33176 US MIAMI, FL 33172 US

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.

SIGNATURE: 05/01/2007

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition Title: ( ) Delete Title:

AVILA, KATIUSKA AVILA, KATIUSKA Name: Name: 175 FOUNTAIN BLUE BLVD STE 1R12 Address: 175 FOUNTAINEBLEAU BLVD STE 1R12 Address:

City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33172

( ) Delete Title: VΡ Title: (X) Change ( ) Addition Name: VARGAS GARCIA, CAMILO J Name: VARGAS GARCIA, CAMILO J 175 FOUNTAIN BLUE BLVD STE 1R12 Address: 175 FOUNTAINEBLEAU BLVD STE 1R12 Address:

MIAMI, FL 33176 MIAMI, FL 33172 City-St-Zip:

City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition GARCIA, NORMA Name: GARCIA, NORMA Name:

175 FOUNTAIN BLUE BLVD STE 1R12 Address: 175 FOUNTAINEBLEAU BLVD STE 1R12 Address

City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33172

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: KATIUSKA AVILA MS 05/01/2007