

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000076894

Entity Name: NORMA STAR CORP

FILED
Jun 11, 2009
Secretary of State

Current Principal Place of Business:

175 FOUNTAINEBLEAU BLVD
1R12
MIAMI, FL 33172

Current Mailing Address:

175 FOUNTAINEBLEAU BLVD
1R12
MIAMI, FL 33172

New Principal Place of Business:

175 FOUNTAINEBLEAU BLVD
1H
MIAMI, FL 33172

New Mailing Address:

175 FOUNTAINEBLEAU BLVD
1H
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:

GARCIA, NORMA
175 FOUNTAINEBLEAU BLVD
1R12
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

GARCIA, NORMA
175 FOUNTAINEBLEAU BLVD
1H
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: NORMA GRACIA

06/11/2009

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:

Title: P () Delete
Name: AVILA, KATIUSKA
Address: 175 FOUNTAINEBLEAU BLVD STE 1R12
City-St-Zip: MIAMI, FL 33172

Title: VP () Delete
Name: VARGAS GARCIA, CAMILO J
Address: 175 FOUNTAINEBLEAU BLVD STE 1R12
City-St-Zip: MIAMI, FL 33172

Title: T () Delete
Name: GARCIA, NORMA
Address: 175 FOUNTAINEBLEAU BLVD STE 1R12
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VARGAS, KATIUSKA
Address: 175 FOUNTAINEBLEAU BLVD STE 1H
City-St-Zip: MIAMI, FL 33172

Title: VP (X) Change () Addition
Name: VARGAS GARCIA, CAMILO J
Address: 175 FOUNTAINEBLEAU BLVD STE 1H
City-St-Zip: MIAMI, FL 33172

Title: T (X) Change () Addition
Name: GARCIA, NORMA
Address: 175 FOUNTAINEBLEAU BLVD STE 1H
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: NORMA GARCIA

T

06/11/2009

Electronic Signature of Signing Officer or Director

Date