

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000067519

FILED
Mar 25, 2009
Secretary of State

Entity Name: STAR FOODS DISTRIBUTOR INC

Current Principal Place of Business:

8900 NW 38 DRIVE
SUITE 1
CORAL SPRINGS, FL 33065

New Principal Place of Business:

785 S. CONGRESS AVE
DELRAY BEACH, FL 33445

Current Mailing Address:

8900 NW 38 DRIVE
SUITE 1
CORAL SPRINGS, FL 33065

New Mailing Address:

13716 YARMOUTH DRIVE
APT. D
WELLINGTON, FL 33414

FEI Number: 20-4874769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMOS, WILFREDO
8900 NW 38 DR
SUITE 1
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

RAMOS, WILFREDO
13716 YARMOUTH DR
APT. D
WELLINGTON, FL 33414 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: WILFREDO RAMOS

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMOS, WILFREDO
Address: 8900 NW 38 DR APT 1
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAMOS, WILFREDO
Address: 13716 YARMOUTH DR APT. # D
City-St-Zip: WELLINGTON, FL 33414

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: WILFREDO RAMOS

OWNE

03/25/2009

Electronic Signature of Signing Officer or Director

Date