

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90004 030 ***150.00

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1. Entity Name
STARNET INTERNATIONAL CORP.



Principal Place of Business

200 HOPE STREET
LONGWOOD, FL 32750

Mailing Address

200 HOPE STREET
LONGWOOD, FL 32750

DO NOT WRITE IN THIS SPACE



01272004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3164011

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SASSO, MICHAEL C PA
390 N ORANGE AVE #2700
ORLANDO, FL 32804
1031 West Morse Blvd.
Suite 260
Winter Park, FL 32789

**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

Michael C. Sasso

2/6/04

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
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WENDEL, WENDEL R
200 HOPE ST.
LONGWOOD, FL 32750

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
TURCOTTE, RONALD
200 HOPE ST
LONGWOOD, FL 32750

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COO
BUDD, ROBERT
200 HOPE STREET
LONGWOOD, FL 32750

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
ALTMAN, MARC
200 HOPE ST
LONGWOOD, FL 32750

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BERRY, MARY
200 HOPE STREET
LONGWOOD, FL 32750

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: *Mary E. Berry* MARY E. BERRY

1-27-04

407-830-1199
Daytime Phone # EXT 113