

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000006298 (1)

1. Corporation Name

STARLIGHT CONTINENTAL, INC.



Principal Place of Business

~~25 SOUTHEAST AVE.
SUITE 730
MIAMI FL 33131~~

Mailing Address

~~25 SOUTHEAST AVE.
SUITE 730
MIAMI FL 33131~~

2. Principal Place of Business

2a. Mailing Address

21 4901 NW 17th Way

26 4901 NW 17th Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 305

27 Suite 305

City & State

City & State

23 Ft. Lauderdale, FL

28 Ft. Lauderdale, FL

Zip

Country

Zip

Country

24 33309

25 USA

29 33309

30 USA

9. Name and Address of Current Registered Agent

~~BLAXBERG, J. BARRY
25 SE 28 AVE #730
MIAMI FL 33131~~

81 Name

Michael J. Robbins

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

4901 NW 17th Way

83

Suite 305

84 City

Fort Lauderdale

FL

85 Zip Code
33309

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agents must sign this statement.

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

0 DEMETRIOU, HARRY
~~25 SE 28 AVE #730~~
~~MIAMI FL~~

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE 12 NAME ☒ Change ☐ Addition

Demetriou, Harry
4901 NW 17th Way - Suite 305
Fort Lauderdale, FL 33309

14 CITY-ST-ZIP ☐ Change ☐ Addition

2 TITLE 22 NAME ☐ Change ☐ Addition

23 STREET ADDRESS

24 CITY-ST-ZIP ☐ Change ☐ Addition

3 TITLE 32 NAME ☐ Change ☐ Addition

33 STREET ADDRESS

34 CITY-ST-ZIP ☐ Change ☐ Addition

4 TITLE 42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS

44 CITY-ST-ZIP ☐ Change ☐ Addition

5 TITLE 52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS

54 CITY-ST-ZIP ☐ Change ☐ Addition

6 TITLE 62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

Harry Demetriou
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)