## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400062747 (8)

STARLIGHT TRADING, INC.

Principal Place of Business

## **FILED** Apr 29 1997 8:00am Secretary of State



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8801 8W 44 8 MIAMI FL 3315		6601 SW 44 Miami Fl 33							
						3. Date Incorporated or Qualified 08/22/1994	3a. Date 05/01	of Last I /1996	Report
2. Principal P	Place of Business	2a. Mailing	Address			4. FEI Number	<u> </u>	·	pplied For
21		26				65-0556116		N	ot Applicable
Sulte, Apt. #, etc.		<del>  -</del>	Suite, Apt. #, etc.			5. Certificate of Status Desired	ertificate of Status Desired Status Desired Fee Required		
City & Stat		27   City & S	toto						·
23	О	28	iaie			6. Election Campaign Financing Trust Fund Contribution		•	May Be
Zip	Country	Zip		Country	·	8. This corporation has liability for in			to Fees
24	25	29	30	¬ '	,	Florida Statutes	Yes		6. 189.USZ,
72J	9, Name and Address of Cu			3		10. Name and Address of New Reg			
FON	IT, EUGENE S			81	Name				
6601 SW 44 STREET					Street Ado	i fress (P.O. Box Number is Not Acceptab	اه/		
MIAI	MI FL 33155			82	Ollegi Muc	mess (i .o. box inomiser is not Acceptab	10/		
				83					
				84	City	·····		<b>85</b> Zip	Code
					1		FL		
	to the provisions of Sections 607 registered agont, or both, in the Sam familiar with, and accept the c	ubouz and 607.1508, State of Florida. Such Obligations of, Section	riorida Statutes, change was aut 607.0505, Florid	ine abov horized b sa Statute	re-named cor y the corpora s.	poration submits this statement for the pution's board of directors. I hereby accep	urpose of c t the appoi	nanging ntment as	its registered s registered
SIGNATURE	Signature, typed or printed name of registere	ed agent and title II applicable	. (NOTE: B	eq stered An	ont signature recus	ired when reinstating)	DATE		
12.	OFFICERS	S AND DIRECTORS		13.	a a signature (equ	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE	PD		DELETE	1.1 TITLE	·			Change	Addition
NAME	FONT, ANA M			1.2 NAME	-			•	
STREET ADDRESS	6601 SW 44 STREET			1.3 STREET	T ADDRESS				
CITY-ST-ZIP	MIAMI FL			1.4 CITY- 8	ST - 71P				
TITLE	VTSD		DELETE	2.1 TITLE			L	Change	Addition
NAME	FONT, EUGENE S			22 NAME					
STREET ADDRESS	6601 SW 44 STREET			23 STREET	T ADDRESS				
CITY-ST-ZIP	MIAMI FL			2 4 CITY-	S1-7IP				
TITLE		i.	DELETE	31 TITLE	,			] Change	Addition
NAME				32 NAME					
STREET ADDRESS				3 3 STREE	I ADDRESS				
CITY-ST-ZIP			DELETE	3.4. CITY-	S1 - ZIP			1	
TITLE		ι	DELETE	4.1 TITLE			L	] Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				t .	I ADDRESS				
CITY-ST-ZIP			DOLETO	4.4 CITY - S	ST - ZIP			T Object	
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NAME				5.2 NAME		•			
STREET ADDRESS				5.3 STREET					
CITY-ST-ZIP			Torus II	5.4 CITY - 9	S1-20°			1 2	
TITLE		L	DEFELE,	6.1 TITLE			L	Change	Addition
NAME				6.2 NAME					
STREET ADDRESS	•			6.3 STREET	ADDRESS				
PITY_ST_7IP				CAPITY 6	27 710				

14. Ido 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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, or on an attachment with an address.

(305)667-8363