

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

FILED  
May 22 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000062747 (8)

1. Corporation Name

STARLIGHT TRADING, INC.



Principal Place of Business

Mailing Address

6801 SW 44 STREET  
MIAMI FL 33155

6801 SW 44 STREET  
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 6489 SW 50 Street

26 6489 SW 50 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip

Country

Zip

Country

24 33155

25

29 33155

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FONT, EUGENE S  
6801 SW 44 STREET  
MIAMI FL 33155

81 Name Eugene Font

82 Street Address (P.O. Box Number is Not Acceptable)  
6489 SW 50 St.

83

84 City Miami

FL

85 Zip Code 33155

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 of officer or director of corporation and not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME FONT, ANA M  
STREET ADDRESS 6801 SW 44 STREET  
CITY-ST-ZIP MIAMI FL

1.1 TITLE ☐ Change ☐ Addition

TITLE VTSD ☐ DELETE

NAME FONT, EUGENE S  
STREET ADDRESS 6801 SW 44 STREET  
CITY-ST-ZIP MIAMI FL

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

SIGNATURE

400002534704  
-05/26/98--01027--029  
\*\*\*150.00

14. 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 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, or on an attachment with an address.

4/29/98 (305) 667-8363

CP2E034 (10/97)