


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000067033
 1. Entity Name
 STAR ELECTRIC DISTRIBUTORS, INC.



Principal Place of Business Mailing Address
 7540 NW 66TH ST. 7540 NW 66TH ST.
 MIAMI, FL 33166 MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-0529730 Not Applicable

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

6. Name and Address of Current Registered Agent
 BERNSTEIN, ROBERT
 7540 NW 66TH ST.
 MIAMI, FL 33166

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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 _____ (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 BERNSTEIN, ROBERT 7540 NW 66TH ST. MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY ST ZIP	D BRAVO, JUAN 7540 NW 66TH ST. MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY ST ZIP	D PINO, CARLOS 7540 NW 66TH ST. MIAMI, FL 33166
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01/20/04 00076-004 150.00

000000008777
 01/20/04-80076-004 150.00

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: *Robert P. Bernstein* 1/14/04 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date