

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 27, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P94000067033**

1. Entity Name  
**STAR ELECTRIC DISTRIBUTORS, INC.**



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

Mailing Address  
**C/O IVAN A GOMEZ PA  
 601 BRICKELL KEY DR STE 507  
 MIAMI, FL 33131**



01032008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0529730**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**IAG CORP. SRVS INC  
 601 BRICKELL KEY DR STE 507  
 MIAMI, FL 33131**

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2008 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	BERNSTEIN, ROBERT
STREET ADDRESS	7540 NW 66TH ST.
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	D
NAME	BRAVO, JUAN
STREET ADDRESS	7540 NW 66TH ST.
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	D
NAME	PINO, CARLOS
STREET ADDRESS	7540 NW 66TH ST.
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/10/08-80029-006 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Bernstein President* 3/24/08 305 591 8390  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #