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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000076513 (8)

STARBRITE SYSTEMS, INC.

FILED May 01 1998 8:00am Secretary of State



				_				
Principal Plac	e of Business	Mailing Address	failing Address			L LEBOLDE LIA CALLA DIONI DONIO MATINI ARBITA PIÈ	E18 01101 E1181 11	
1036 NW 128		1036 NW 128TH AVE	1036 NW 128TH AVE					
MIAMI FL 331	82	MIAMI FL 33182	MIAMI FL 33182			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						10/18/1994		
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	ΙA	pplied For
21		26	26			65-0527075	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27				6. Certificate of States Desired	Fee R	equired
City & State	е	City & State				6. Election Campaign Financing		May Be
23 Zip	Country	28 Country				Trust Fund Contribution		to Fees
	}			6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24	25 9. Name and Address of Curren	29 Agent	30]	3;		Personal Property Tax due June 30. 10. Name and Address of New Registered		
CA		· i i gioria de 7 igoria		81	Name	10. Name and Address of New Hogistere	ANGUIN	
	av ed ra, fernando sr 36 N W 128th ave							
	MI FL 33182		82 Street A			ress (P.O. Box Number is Not Acceptable)		ĺ
(MIL)	(MI LT 22105			83				
				84	City	FI	85 Zip	Code
11, Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the ab	oove	-named corp	poration submits this statement for the purpose	of changing	its registered
office or r agent. I a	r egistered agent, or both, in the State im fam iliar with, and accept the obliga	of Florida. Such change was a itions of, Section 607.05 05 , Flo	authorized orida Stati	d by utes	the corpora	tion's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE								
	Signature, typed or printed name of registered ager			Ager	nt signature requ	red when reinstaling) DATE		· · · · · · · · · · · · · · · · · · ·
12.				13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE NAME	•			1.1 TITLE			L Change	☐ Addition
	\$AAVEDRA, FERNANDO SR 1036 NW 128TH AVE		1.2 NAME					
STREET ADDRESS	MIAMI FL 33182		1.3 STREET ADDRESS					ļi
CITY-ST-ZIP TITLE				4 CITY-ST-ZIP			Change	Addition (
NAME :	SA AVEDRA, FERNANDO E JR		2.2 NAME				C Orange	L Addition
STREET ADDRESS	1036 NW 128TH AVE			2.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33182			2.4 CITY - ST - ZIP				
TITLE	VP	DELETE	3.1 TiTLE		1-211		Change	Addition
NAME	Attument transiti		1	3.2 NAME				
STREET ADDRESS	ADDO BILL ADDY A BLUE			3.3 STREET ADDRESS				1
CITY-ST-ZIP	AN A. 24 P4		3.4. CI		1			
TITLE			4.1 TIT	-	·		☐ Change	☐ Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 \$TI	RÉET A	ADDRESS			
CITY-ST-ZIP	4.4 CI		Y - ST	- ZiP				
TITLE		DELETE	5.1 TITLE				☐ Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5 3 STI	RÉET A	ADDRESS .			
CITY-ST-ZIP			5.4 CIT	Y-\$1	-ZIP		·	
TITLE	DELET		61 TITLE				Change	☐ Addition
NAME			6.2 NA	ME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	all the sale in th	1.	6.4 CIT	Y-ST	- ZIP	0		

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 truefee 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 andress