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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Socretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

P9400084293

STAR INTERNATIONAL PURCHASING AGENCY INC.

Principal Plac	ce of Business	Mailing Address				
444 BRICKELL AVENUE,						
SUITE 51-125,				DO NOT WRITE IN THIS SPACE		
MIAMI, FL. 33131					3. Date Incorporated or Qualified	
					NOV. 14. 1994	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 444 BRICKELL AVE. 26 SAME					ID#65-0597851	Not Applicable
Suite, Apt #, etc. Suite, Apt #, etc. 22 SUITE # 51-125 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23 M [<i>I</i>	MI, FL. Country	28 Zip	Count	rv		Added to Fees
24 33		29	30	• •	 This corporation owes or has paid the Personal Property Tax due Jurie 30. 	Yes No
241 33.	9. Name and Address of Curren		1301		10. Name and Address of New Register	
	Transcally regarded of Carre		8	1 Name		
MR.	. HECTOR JIMENEZ	7	L			-n
444 BRICKELL AVENUE,				2 Street Add	ress (P.O. Box Number is Not Acceptable)	
	TE 51-125,	- •	B	3		
	AMI, FL. 33131			ļ		
	, 12. 00101		8	4 City		85 Zip Code
* 11 Purcuant	to the provisions of Sections 607.05/1	2 and 6/17 15/08. Flor da Stati	ites, the abo	ve-named corr	poration submits this statement for the nurgos	se of changing its registered
office our	registered agent, or both, in the State.	of Horida, Such change was	authorized b	by the corporal	tion's board of directors. I hereby accept the	appointment as registered
agent la	im familiar with, and accept the oblig-	<u>itions of Section 607.0505, F</u>	lorida Statut	es +-	41	104
SIGNATURE .	Stratus type program but on a charge to the per-	2 // E	T Figure 1 A	Octob School Laboration Company	red when reinstating) DAI	0/10
12.	OFFICERS AND	O DIBECTORS	13.	the coll	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	<u> </u>	☐ DELETE	1111111	T	-	☐ Change ☐ Addition
NAME	MR. HECTOR JIN	MENEZ., PRES.	1.2 NAM6	.		
STREET ADDRESS	444 Brickell Ave			ET ADDRESS		
CITY-ST-ZIP	Miami, FL 33131		1.4 CITY	· SI · 7iP		
TITLE		□ 0€LETÉ	2.1 111LE			☐ Change ☐ Addition
NAME	MR. HECTOR B.	JIMENEZ JR.	2.2 NAMI			
STREET ADORESS	VICE-PRES.		2.3 STHE	EL ADDRESS		
CITY - ST - 7IP	444 Brickell Ave		2 4 CITY	· S1 ZIP		
TITLE	Miami, FL 33131	DELETE	3 1 TITLE			☐ Change ☐ Addition
NAME	,		3 2 NAM	.		
' STREET ADDRESS			3 3 S1REI	LT ADDRESS		
CITY+ST-ZIP			3.4 CITY	- ST - ZIP		
TITLE		DELETE	4.1 101.0			☐ Change ☐ Addition
NAME			4 2 NAM	F		}
STREET ADDRESS			4.3 STREE	T ACORESS		
CITY-ST-7IP			4.4 CHY-	S1-70P		
TITLE		☐ DE LETE	5 1 1 11 LF		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			5 2 NAM(45
STREET ADDRESS			5 3 \$1141	T ADDRESS		
CITY-ST-ZIP			5.4 (J1)Y-			5.30
TITLE		DILETE	61 1111		``````````````````````````````````````	
NAME			6.2 NAM		300002532 -05/22/9801018	්ප්රි යි
STREET ADDRESS				1 ADDRESS	-00/52/3801018:	050
a mice unique 33			936101	, committee	***150.00	

CITY-ST-ZIP

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 logal effect as if made under oath, that I am an officer or director of the corporation or the receiver or frustree 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.

SIGNATURE:

FILED

May 20 1998 8:00am

Secretary of State