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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000017351 (4)

STAR FLY TRADING, CORP.

Lam an officer or director of the appears in Block 12 or Block

SIGNATURE:

Principal Place of Business Mailing Address 7311 NORTH WEST 12TH STREET 7311 NORTH WEST 12TH STREET SUITE NO. 12 SUITE NO. 12 MIAMI FL 33126-1925 MIAMI FL 33126 3. Date Incorporated or Qualified 3a, Date of Last Report 03/02/1995 02/27/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0559608 Not Applica 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additiona 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.03 Yes No 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CALLES: CAPLOS 8900 N.W. 72ND AVENUE 82 MIAMI FL 33122 -83 City nd 667 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered as of, Section 607.0505, Florida Statutes. 11. Pursuant to the pro office or registere, agent I am lamit SALLES SIGNATURE and ottent applicable AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition VST0 TITLE 1.1 TITLE SALLES, CARLOS SALLES, CARLOS NAM 5 1.2 NAME 7311 N.W. 12 4 STREGT 51E. /2 3360 N.W. 72 AVE. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1:AMi, FL. 33126 1.4 CITY-ST-ZIP CITY - \$1 - ZIP DELETE Change Addition 2.1 TITLE TITLE SALLES, CARLOS 2.2 NAME NAME % 3360 N.W. 72ND AVE. STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL 33122 CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Addition Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 011Y-ST-7:P 34. CITY-ST-ZIP Change Addition □ DELETE 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-20F 4.4 City - St - ZiP Addition DELETE Change TITLE 5.1 TITLE NĀME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP C_11 - S1 - 2IP DELETE ___ Addition TITLE 61 TITLE NAMC 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CDY ST-ZIP for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 14. I do hereby certify that the information supplied with this filing does not quality il annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that r or trasfee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this annual report or supernental annual report

SALLES, CARLOS