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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028896 (5)

STARBANK FINANCIAL INC.

FILED Mar 17 1997 8:00am Secretary of State

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1/12/97

Principal Plac 5950 W OAKL/ SUITE 118 LAUDERHILL F US 2. Principal P 21 Suite, Apt. 22	AND PK BLVD L 33313 Place of Business	Mailing Address 5950 W OAKLAND PK BL SUITE 118 LAUDERHILL FL 33313-12 US 28. Mailing Address 26 Stute, Apt. #, etc.			3. Date Incorporated or Qualified 04/12/1995 4. FEI Number 65-0578087 5. Certificate of Status Desired	3a. Date of t 07/15/19	_ast Report
City & Stat	le	City & State		 ,	Election Campaign Financing Trust Fund Contribution		5.00 May Be
Zip 24	Country 25	28 Zip 29	Country 30	,	8. This corporation has liability for in Florida Statutes	ntangible tax ur Yes X No	nder s. 199.032,
	9. Name and Address of Current	Registered Agent		r	10. Name and Address of New Reg	istered Agent	<i>V</i> .
3732	NGS, INC. 2 N.W. 16TH STREET RT LAUDERDALE FL 33311		81 82 83 84		ress (P.O. Box Number is Not Acceptabl	FL 85	Zip Code
office or r agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of maniliar with, and accept the obligations.	of Florida. Such change was	authorized by	the corporal	oration submits this statement for the pulion's board of directors. I hereby accep	urpose of chang the appointmo	jing its registered int as registered
SIGNATURE	Signature, typed or printed natic of registered agent	Land title if applicable (NO	OTE Bagistered Age	art signature regol	red when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRE	
TITLE NAME STREET ADDRESS (CITY-ST-ZIP TITLE	STEWART, SONIA B 230 LACOSTA WAY FORT LAUDERDALE FL	DETELE	1.1 TITE 1.2 NAME 1.3 STRELT 1.4 CITY-5 2 1 TITLE	ADDRESS 2	TEWART, SONIA B 30 LA COSTA WAY T. LAUDERDALG, FI	Ch	12.6
NAME Street address City-St-Zip			22 NAME 23 STREET 2 4 Dity-	·	****	joe,	
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELFTE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4. CHY-5			Ch	nange [] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.1 TITLE 4 2 NAME 4.3 STREET 4.4 CITY-S	ADDRESS		Ch	nange Addition
TITLE NAME STREET ADDRESS		DELETE	5.1 TITLE 5.2 NAME 5.3 STREET	ADORESS		Ch	ange Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELFTE	5.4 CITY-S 6.1 TITLE 62 NAME 63 STREET 64 CTY-S	ADDRESS 1. ZIP		☐ Ch	
informatio I am an o	on indicated on this annual report or su	applemental annual report is the receiver or trusted empor	true and accu wered to exec	irate and that	d in Section 119.07(3)(i), Florida Statutes I my signature shall have the same legal It as required by Chapter 607, Florida St	effect as if mad	de under oath; that