

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # P95000093334

1. Entity Name
STARLIGHT GYMNASTICS, INC.



Principal Place of Business
**3000 PLUMMER COVE RD
JACKSONVILLE, FL 32223 US**

Mailing Address
**3000 PLUMMER COVE RD
JACKSONVILLE, FL 32223 US**



03052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3354639	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**IVANOV, VESSELINA D
3000 PLUMMER COVE RD
JACKSONVILLE, FL 32223**

**DO NOT WRITE
IN THIS SPACE**

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

**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**

U000000866936
04/08/08-80050-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	IVANOV, BORIL
STREET ADDRESS	1759 PECKY CYPRESS LANE
CITY-ST-ZIP	JACKSONVILLE, FL 32233

TITLE	P
NAME	IVANOV, VESSELINA D
STREET ADDRESS	1759 PECKY CYPRESS LANE
CITY-ST-ZIP	JACKSONVILLE, FL 32233

TITLE	
NAME	
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CITY-ST-ZIP	

**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: *Boril Ivanov*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BORIL IVANOV 3/7/08 904-923-3882

Date

Daytime Phone #