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**Mar 03 1997 8:00am
Secretary of State**

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000037364 (2)

1. Corporation Name
STARDOM SALES, INC.



Principal Place of Business
**3839 N. MONROE ST.
SUITE 7
TALLAHASSEE FL 32303**

Mailing Address
**3839 N. MONROE ST.
SUITE 7
TALLAHASSEE FL 32303-2175**

3. Date Incorporated or Qualified **04/30/1996** 3a. Date of Last Report **N/A**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number **59-3375113** Applied For Not Applicable

21 Suite Apt # etc:

26 Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PANNELI, DOMINIC J
3839 N. MONROE ST.
SUITE 7
TALLAHASSEE FL 32303**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **D PANNELI, DOMINIC J**
STREET ADDRESS **3531 PACES MILL RD.**
CITY- ST- ZIP **TALLAHASSEE FL 32308**

1.1 TITLE Change Addition **V/SIT**
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE DELETE
NAME **D PANNELI, LYNDA D**
STREET ADDRESS **3531 PACES MILL RD.**
CITY- ST- ZIP **TALLAHASSEE FL 32308**

2.1 TITLE Change Addition **P**
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included 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 trustee 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 from an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **DOMINIC J. PANNELI**

Date **2-27-97** Daytime Phone # **904-514-1902/1903**

CR2E034 (9/96)