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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000058870 (2)

STAR 104 DEVELOPMENT, INC.

Principal Place of Business Mailing Address P O BOX 783 701 INDIANA AVE PALM HARBOR FL 33683 PALM HARBOR FL 34682-0783 3. Date Incorporated or Qualified 3a. Date of Last Report 07/10/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-339**7** 21 Not Applicable Suite Act # etc. Suite, Apt. #. etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Zio Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HARRIS, TRACY J JR 701 INDIANA AVE 82 Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 33693 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Suppose typic or printed name of eaglighted against and the if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) PSTD ☐ DELETE Change ☐ Addition TITLE 1.1 TITLE HARRIS, TRACY J JR NAVE 1.2 NAME 701 INDIANA AVE 1.3 STREET ADDRESS STREET ADDREST PALM HARBOR FL 34682 C(11Y - S1 - Z)F 1.4 CITY-ST-ZIP DELETE Addition Change 31113 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS

2.4 CITY-ST-ZIP

3.4 City-St-7/P

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3.1 TITLE

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CITY - ST - ZIE 6.4 CITY-ST-ZIP 14. I do 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 legal effect as if made under oath; that I am anyofficer or director of the componation or the receiver or justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block

SIGNATURE:

CITY ST ZIP

STREET ADDRESS C(TY+ST+7)P

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Mar 12 1997 8:00am

Secretary of State