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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600060081

2. Principal Place of Business

21

STARLITE TRANSPORTATION CORP.

Mailing Address	
19317 CR 33 GROVELAND FL 34736	
	19317 CR 33

26

2a. Mailing Address

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90079 010 ***150.00



Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

07/18/1996

59-3393198

4. FEI Number

	Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 Additional Fee Required		
22 City & Stat	te	City & State		 	6. Election Campaign Financing	\$5.00		
23		28			Trust Fund Contribution	Added t	•	
Zip	Country	Zip	Countr	У	8. This corporation owes the current year	· Intangible		
24	25	1	30		Personal Property Tax.		□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent		
1.017 1	ED STEDUEN F		81	Name				
MILLER, STEPHEN E 19317 CR 33			82	82 Street Address (P.O. Box Number is Not Acceptable)				
GHU	OVELAND FL 34736		83	·]				
			84	City		- 85 Zip (- Codo	
			0	City	F	85 Zip (200e	
					oration submits this statement for the purpose			
	egistered agent, or both, in the State of im familiar with, and accept the obligatio				on's board of directors. I hereby accept the ap	pointment as re	gistered	
-	Sand with sile accept the congation	0000011001.0000111011		··	•			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: I	Registered Age	nt signature required	d when reinstating) DATE		.	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME	STRIBER, GERALD J		1.2 NAME					
STREET ADDRESS	24901 PINE HILL		1.3 STREE	TADDRESS				
CITY-ST-ZIP	LEESBURG FL 34748		1.4 CITY-5					
TITLE	D	☐ DELETE	2.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Change	Addition	
NAME	STRIBER, JEAN M		2.2 NAME					
STREET ADDRESS	24901 PINE HILL			TADDRESS				
	LEESBURG FL 34748							
CITY-ST-ZIP TITLE	D	☐ DELETE	2.4 CITY- 3.1 TITLE	51-ZIP		[] Change	Addition	
NAME	MILLER, STEPHEN E		3.2 NAME			onlings		
STREET ADDRESS	19317 CR 33			T 4000000				
	GROVELAND FL 34736			TADDRESS				
CITY-ST-ZIP	D		3.4. CITY-1	S1-ZIP		Change	Addition	
TITLE	. •					□ cuarôs		
NAME	MILLER, LINDA S		4. 2 NAME					
STREET ADDRESS	19317 CR 33			TADDRESS				
CITY-ST-ZIP	GROVELAND FL 34736	☐ DELETE	4.4 CITY-5	T-ZIP		Change	■ A alaki*	
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME			☐ Criange	☐ Addition	
NAME				TADDOCCO				
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP		O ==: ===	5.4 CITY-S	T- ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	TADDRESS				
CITY-ST-ZIP			6.4 CITY-S					
14. I hereby of indicated	certify that the information supplied with	this filing does not qualify for t	the exempt	ion stated in S	ection 119.07(3)(i), Florida Statutes. I further	certify that the in	formation	

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 or on the receiver of 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 or on the receiver of 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 or on the receiver of trustee empowered to execute this report as required by Chapter 607.

SIGNATURE: