## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000090625

City-St-Zip:

LARGO, FL 33770

Entity Name: STAR TRAVEL TOUR SERVICE, INC

FILED May 31, 2008 Secretary of State

		THO WELL IN					
Current Principal Place of Business:				New Princ	New Principal Place of Business:		
JOHANSE	ST BAY DRI\ SN BUILDING BLUFFS, F	3	US				
Current M	lailing Add	ress:		New Maili	ng Address	:	
<b>JOHANSE</b>	T BAY DRI\ N BUILDING BLUFFS, F	3	US				
FEI Number:	: 59-3409658	FEI Nu	mber Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	l Address o	f Current I	Registered Agent:	Name and	Address of	New Registered Agent:	
1245 COU SUITE 102	N, ALAN S E RT STREET PATER, FL 3	Γ					
	named enti e of Florida.	ty submits t	this statement for the	purpose of changing i	its registered	office or registered agent, or both,	
SIGNATU							
	Elect	ronic Signa	ture of Registered Ag	jent		Date	
Election Car	npaign Finan	cing Trust Fu	und Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D JOHANSEN, 2620 W BAY LARGO, FL	Y DR, JOHAN	SEN BLDG	Title: Name: Address: City-St-Zip:	JOHANSEN,	DR, JOHANSEN BLDG	
Title: Name: Address: City-St-Zip:		() Delete KATHLEEN ( YDR, JOHAN 33770		Title: Name: Address: City-St-Zip:	,	()Change ()Addition	
Title: Name: Address: City-St-Zip:		(X) Delete WILLIAM JO Y DR, JOHAN 33770		Title: Name: Address: City-St-Zip:	,	( ) Change ( ) Addition	
Title: Name: Address:		(X) Delete JOAN DANF DR. JOHAN		Title: Name: Address:	1	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: GLEN JOHANSEN O 05/31/2008