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 # P96000104267

1. Corporation Name

STAR BRITE INDUSTRIES, INC.

Principal Place of Business	•	
8914 NW 25TH COURT		
CORAL SPRINGS EL 33065		

Mailing Address

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90017 023 ***150.00



9914 NW 25TH COURT CORAL SPRINGS FL 33065	8914 NW 25TH COURT CORAL SPRINGS FL 33065		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualifed 01/01/1997	_
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For	
11	26		65-0724028 Not Applicat	ole
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired 5. Certificate of Status Desired 5. Sertificate 5. Sertificate	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip Country	Zip Cot 30	untry	18. This corporation owes the current year intangible Personal Property Tax. ☐ Yes	
g Name and Address of Cut			10. Name and Address of New Registered Agent	
	<u> </u>	81 Name		
CHERESNICK, PHILIP 8914 NW 25TH COURT		82 Street Add	fress (P.O. Box Number is Not Acceptable)	
CORAL SPRINGS FL 33065		83		
		84 City	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 title if applicable. (NOTE: Re	gistered Agent signature requ	uired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	P DELETE	1.1 TITLE	☐ Change ☐ A	Addition
NAME	CHERESNICK, PHILIP	1.2 NAME		
STREET ADDRESS	8914 NW 25TH COURT	1.3 STREET ADDRESS		1
CITY-ST-ZIP	CORAL SPRINGS FL 33065	1.4 CITY+ST-ZIP		
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ A	Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS]
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	DELETE,	3.1.TMLE ====================================	Change D	Addition
NAME		3.2 NAME		l
STREET ADDRESS	·	3.3 STREET ADDRESS		
CITY-ST-ZIP	<u></u>	3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ A	Addition
NAME		4. 2 NAME		1
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE	☐ Change ☐ A	Addition
NAME		5.2 NAME	•	ļ
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE	☐ Change ☐ A	Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	·	6.4 CITY-ST-ZIP		

14. I 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 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, or on an attachment with an address, with all other like empowered.

954-341-6118