# 17000074661

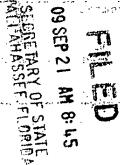
| (Requestor's Name)  (Address)   |                        | 4(                                    | 001578                                  |
|---|------------------------|---------------------------------------|---|
| (Address)  (City/State/Zip/Phone #)                                   |                        |                                       |   |
| PICK-UP WAIT MAIL   |                        |                                       | 06/29/09010                             |
| (Business Entity Name)  | general (              | · · · · · · · · · · · · · · · · · · · | an in salah sa                          |
| (Document Number) : .   | . به به درو الولوجيو ه |                                       |   |
| Certified Copies <u>+ c + m</u> Certificates of Status <u>+ c + m</u> |                        | <u> </u>                              | 2000 1.<br>2000 1.                      |
| Special Instructions to Filing Officer:                               | 1 Years 2 1 4          |                                       | ξ · · · · · · · · · · · · · · · · · · · |
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Office Use Only



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July 7, 2009

MOHAMMED SALAIMEH 5038 WEST IRLO BRONSON MEMORIAL HWY. KISSIMMEE, FL 34746

SUBJECT: STAR ISLAND FOOD AND GIFT, INC.

Ref. Number: P97000074660

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Dariene Connell Regulatory Specialist II

Letter Number: 209A00023150

#### **COVER LETTER**

TO: Amendment Section

| Division of Corporations  |  |  |  |
|---|--|--|--|
| SUBJECT: STAR ISLAND FOOD   | AND GIFT, INC.   |  |  |
| DOCUMENT NUMBER: P9700007466  | 0  |  |  |
| DOCUMENT NUMBER: P9700007466  |  |  |  |
| The enclosed Articles of Dissolution and fee are  | e submitted for filing.  |  |  |
| Please return all correspondence concerning this  | matter to the following:   |  |  |
| MOHAMMED SA   | LAIMEH   |  |  |
| (Name of Cont   | act Person)  |  |  |
| STAR ISLAND FOOD AND GIFT, INC.   |  |  |  |
| (Firm/Co  | mpany) 全置·第  |  |  |
| 5038 W. IRLO BRONSON MEMOR  | SIAL HWY. SERV 21  |  |  |
| (Addres   | angle and a second a second and |  |  |
| KISSIMMEE, FL. 34746 US   | STATE OF   |  |  |
| (City/State an  | d Zip Code)  |  |  |
| For further information concerning this matter.   | please call:   |  |  |
| MOHAMMED SALAIMEH (Name of Contact Person)  | at ( 407 ) 397-8980  (Area Code & Daytime Telephone Number)  |  |  |
| Enclosed is a check for the following amount:   | ( · · · · · · · · · · · · · · · · · · ·  |  |  |
| (A  | 43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, ertified Copy   |  |  |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle   |  |  |

Tallahassee, FL 32301

## Star Island Food and Gift, Inc. D/B/A Star Island Foods

5038 W. Irlo Bronson Memorial Hwy. Kissimmee, Fl. 34746 Phone # (407) 396-1682

September 18, 2009

Florida Department of State Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Reference: Star Island Food and Gift, Inc.

**CLOSED OF BUSINESS on May 02,2009** 

To Whom It May Concern:

Please, be advised that our business closed its operations due insolvency. We no longer able to operate this business as of January 01, 2009 we closed our doors. At the time of closing the business was operating at a loss and no income was generated at closing from the disposition of assets.

Sincerely yours,

X

Mohammed Salaimeh

President

### ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

EIRST: The name of the corporation as currently filed with the Florida Department of State:

| FIRST:  | The name of the corporation as currently filed with the Florida Department   | t of Sta     | te:     |             |
|---------|--|--------------|---------|-------------|
|         | STAR ISLAND FOOD AND GIFT, INC.  | -            |         |             |
| SECOND: | The document number of the corporation (if known): P97000074660  | )            |         |             |
| THIRD:  | The date dissolution was authorized: MAY 02, 2009  |              |         |             |
|         | Effective date of dissolution <u>if applicable</u> : MAY 02,2009  (no more than 90 days after dissolution)   | ion file da  | ate)    |             |
| FOURTH: | Adoption of Dissolution (CHECK ONE)  |              |         |             |
|         | Dissolution was approved by the shareholders. The number of votes ca was sufficient for approval.  | st for d     | issolu  | tion        |
|         | Dissolution was approved by the shareholders through voting groups.  |              |         |             |
|         | The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:  | entitle)     | ≀d      |             |
|         | The number of votes cast for dissolution was sufficient for approval by  | ·            |         |             |
|         |  | SEO          | 09      |             |
|         | (voting group)   | AHAS<br>AHAS | SEP 2   |             |
|         |  | SFE.         | A       | Person<br>A |
| :       | Signature:  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that (fiduciary)   |              | N 8: 45 |             |
|         | , and the second |              |         |             |
|         | MOHAMMED SALAIMEH (Typed or printed name of person signing)  | -            |         |             |
|         |  |              |         |             |
|         | PRESIDENT (Title of powers vigning)  | _            |         |             |
|         | (Title of person signing)  |              |         |             |

Filing Fee: \$35

### **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

| Description of information that must be included in a claim:  Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) | Name of Corporation: STAR ISLAND FOOD AND GIFT, INC.   |
|---|--|
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)   | Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> . |
|   | Description of information that must be included in a claim:   |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   | Mailing address where claims can be sent; (Claims cannot be sent to the Division of Corporations)  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| A claim against the above pamed corporation will be barred unless a proceeding to enforce the claim is commenced  | A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence                                    |
|   | within 4 years after the filing of this notice.  |
|   |  |
| t at the  | t of the   |
| MOHAMMED SALAIMEH  Printed Name of the Person Filing  Stematore of the Person Filing  |  |

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00