2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2006
Secretary of State

DOCUMENT# P98000094488

Entity Name: STARKCO, INC.

Current Principal Place of Business:

6761 ROYAL MELBOURNE DR
MIAMI LAKES, FL 33015

New Principal Place of Business:

Current Mailing Address:

POB 170103
HIALEAH, FL 33017

New Mailing Address:

8940 AZALEA CIRCLE
MIRAMAR, FL 33025

FEI Number: 52-2128882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STARKS, WILLIE
6761 ROYAL MELBOURNE DR
MIAMI LAKES, FL 33015 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STARKS, DUANE
Address: 1717 N BAYSHORE DR #3651
City-St-Zip: MIAMI, FL 33136

Title: D ( ) Delete
Name: STARKS, WILLE
Address: 6761 ROYAL MELBOURNE DR
City-St-Zip: MIAMI LAKES, FL 33015

Title: D ( ) Delete
Name: STARKS, SHARON
Address: 8940 AZALEA CIRCLE
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete
Name: STARKS, CATHERINE
Address: 6761 ROYAL MELBOURNE DR
City-St-Zip: MIAMI LAKES, FL 33015

Title: D ( ) Delete
Name: STARKS, DANTE
Address: 6761 ROYAL MELBOURNE DR
City-St-Zip: MIAMI LAKES, FL 33015

Title: D ( ) Delete
Name: STARKS, DARLENE
Address: 6761 ROYAL MELBOURNE DR
City-St-Zip: MIAMI LAKES, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: SHARON STARKS OFFI 08/02/2006

Electronic Signature of Signing Officer or Director Date