

## 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2002 8:00 am**  
**Secretary of State**

04-17-2002 90011 007 \*\*\*150.00

DOCUMENT # P99000000972

1. Entity Name

STARFISH INVESTMENTS, INC.

Principal Place of Business

7453 STARFISH DR.  
SARASOTA FL 34231

Mailing Address

7453 STARFISH DR.  
SARASOTA FL 34231

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

65-0886499

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONVILLE, CAROL L C.P.A.  
 7029A SOUTH TAMiami TRAIL  
 SARASOTA FL 34231

Name

Street Address (P.O. Box Number is not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS RODRIGUEZ, RANDY A  
 CITY-ST-ZIP 7453 STARFISH DR.  
SARASOTA FL 34231

TITLE ☐ Change ☐ Addition  
 NAME T, S D  
 STREET ADDRESS Randy Rodriguez, Randy A.  
 CITY-ST-ZIP 7453 Starfish Dr.  
Sarasota, FL 34231

TITLE ☐ Delete  
 NAME VP  
 STREET ADDRESS BARBAS, BARRY S  
 CITY-ST-ZIP 7453 STARFISH DR.  
SARASOTA FL 34231

TITLE ☐ Change ☐ Addition  
 NAME VP  
 STREET ADDRESS Barbas, Barry S  
 CITY-ST-ZIP 7453 Starfish Dr.  
Sarasota, FL 34231

TITLE ☐ Delete  
 NAME PTS  
 STREET ADDRESS RODRIGUEZ, FABIOLA  
 CITY-ST-ZIP 7453 STARFISH DR.  
SARASOTA FL 34231

TITLE ☐ Change ☐ Addition  
 NAME P D  
 STREET ADDRESS Rodriguez, Fabiola N.  
 CITY-ST-ZIP 7453 Starfish Dr.  
Sarasota, FL 34231

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Randy A. Rodriguez

3/13/02

Date

941-650-5678

Daytime Phone #

CR2E034 (9/01)