

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000068699

FILED  
Apr 10, 2007  
Secretary of State

Entity Name: STAR SOFT USA INC.

**Current Principal Place of Business:**

247 SW 8TH STREET  
PMB 294  
MIAMI, FL 331303513

**New Principal Place of Business:**

**Current Mailing Address:**

555 NE 15TH ST  
APT # 31C  
MIAMI, FL 33132 US

**New Mailing Address:**

FEI Number: 65-0939339      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CROCE, CLAUDIO  
555 NE 15TH ST  
APT. # 31C  
MIAMI, FL 33132 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CABRAL, WALTER D  
Address: 247 SW 8TH STREET, PMB 294  
City-St-Zip: MIAMI, FL 33130

Title: V ( ) Delete  
Name: GILIOLI, SILMARA B  
Address: 247 SW 8TH STREET, PMB 294  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: CROCE, CLAUDIO  
Address: 247 SW 8TH STREET, PMB 294  
City-St-Zip: MIAMI, FL 33130

**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:

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: CLAUDIO CROCE

MR

04/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date