

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P99000104009

1. Entity Name
STAR ELECTRICAL CONSULTING CORP.



FILED

06 NOV 13 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**7696 PORTO VECCHIO PLACE
DELRAY BEACH, FL 33446**

Mailing Address
**7696 PORTO VECCHIO PLACE
DELRAY BEACH, FL 33446**

2. Principal Place of Business
**101 PLAZA REAL S
Suite, Apt. #, etc. 820
City & State BOCA RATON
Zip 33432 Country USA**

3. Mailing Address
**101 PLAZA REAL S.
Suite, Apt. #, etc. 820
City & State BOCA RATON
Zip 33432 Country USA**



11032006 REIN-P CR2E098 (11/05) 06

4. FEI Number
65-0967240

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

6. Name and Address of Current Registered Agent
**BORRESS, HOWARD
7696 PORTO VECCHIO PLACE
DELRAY BEACH, FL 33446**

7. Name and Address of New Registered Agent
**MR. & MRS. H. BORRESS
101 PLAZA REAL SOUTH
BOCA RATON, FL. 33432
APT. 820
917-217-6978**

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. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE **Howard Borress** DATE **11-7-06**

**FILE NOW!!! FEE IS \$150.00
After January 1, 2007, Fee will be \$300.00**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. MR. & MRS. H. BORRESS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BORRESS, HOWARD 7696 PORTO VECCHIO PL DELRAY BEACH, FL 33446	TITLE NAME STREET ADDRESS CITY - ST - ZIP	101 PLAZA REAL SOUTH BOCA RATON, FL. 33432 APT. 820
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BORRESS, FRANCINE 7696 PORTO VECCHIO PL DELRAY BEACH, FL 33446	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MR. & MRS. H. BORRESS 101 PLAZA REAL SOUTH BOCA RATON, FL. 33432 APT. 820
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE **Howard Borress** DATE **11/7/06**