2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2008 08:00 AN Secretary of State **DOCUMENT # S68656** STAR SUPPLY CO., INC. Principal Place of Business Mailing Address 2336 SE 13 COURT 2336 SE 13 COURT POMPANO BEACH, FL 33062 POMPANO BEACH, FL 33062 115 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0272647 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILSON, RICHARD B. DO NOT WRITE **2336 SE 13TH COURT** POMPANO BEACH, FL 33062 IN THIS SPACE 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 registered agent. SIGNATURE. Signature, typed or preted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remetating) DATE \$5.00 May Bo U00000932724 Election Campaign Financing FILE NOWIN FEE IS \$150.00 Trust Fund Contribution. Added to Fees 05/22/08-80066-010 150.00 After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS DP TITL F NAME WILSON, RICHARD B. STREET ADDRESS **2336 SE 13TH COURT** CITY-ST-ZIP POMPANO BEACH, FL TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME

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:	Rechard	Bulsin	RICHARD	6
	SIGNATURE AND TO	THE OR PRINTED MAKE OF MY	MINIO OFFICER OR HOSEC	TO D

STREET ADDRESS CITY-ST-ZIP

and Bulsin

RICHARD B WILSON

4-26-08

954-946-5440

Daytime Phone #