FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** S95175 (3) STAR LIGHT ENTERTAINMENT, INC. Principal Place of Business Mailing Address 8121 DEVILLE COURT 8121 DEVILLE COURT ORLANDO FL 32817 ORLANDO FL 32817 US 3. Date Incorporated or Qualified 3a. Date of Last Report 11/15/1991 04/18/1995 2. Principa! Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3094515 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Country Ζφ Country 8. This corporation has liability for intangible tax under s. 199,032. 24 25 29 30 Florida Statutes Yes □No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEMPSEY, BERNARD H. JR. 82 Street Address (P.O. Box Number is Not Acceptable) 1031 W MORSE BLVD SUITE 200 83 WINTER PARK FL 32789 84 City 85 Zio Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (12/95) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 **DPST** TILLE DELETE 1.1 TITLE Change Addition NAME LAMBUSTA, JOSEPH 1.2 NAME STREET ADDRESS 8121 DEVILLE COURT 1.3 STREET ADDRESS ORLANDO FL CHTY-ST-ZIP 1.4 CITY-ST-ZIP TIFLE DELETE 2 1 TITLE ☐ Chanoe ■ Addition NAME 2.2 NAME STREEL ADDRESS 2.3 STREET ADDRESS CHY-S1-ZIP 2.4 CITY - \$1 - ZIP TITLE □ DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS Cily-S1-ZiP 4.4 CITY-ST-ZIP DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY - ST - ZIP TITLE □ DELETE 6. 1 TITLE ☐ Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 13 if changed, or on an attachment with an address.