

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V08455 (0)

1. Corporation Name

STARTREK INTERNATIONAL, INC.



Principal Place of Business

1101 BRICKELL AVE.
1101
MIAMI FL 33131
US

Mailing Address

1101 BRICKELL AVE.
1101
MIAMI FL 33131
US

3. Date Incorporated or Qualified
01/23/1992

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

4. FEI Number

65-0310916

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VALERIANO MARCEL
290 BAL BAY DR
STE #104
BAL HARBOR FL 33154

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME VALERIANO, MARCEL
STREET ADDRESS 290 BAL BAY DR. #104
CITY-ST-ZIP BAL HARBOR FL ☐ DELETE

1.1 TITLE P
1.2 NAME VALERIANO, MARCEL
1.3 STREET ADDRESS 290 BAL BAY DR. #104
1.4 CITY-ST-ZIP BAL HARBOR, FL. ☐ Change ☐ Addition

TITLE VP
NAME ORTEGA, JESUS
STREET ADDRESS 290 BAL BAY DR. #104
CITY-ST-ZIP BAL HARBOR FL ☒ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME ESQUILIN, MARIO
STREET ADDRESS 290 BAL BAY DR. #104
CITY-ST-ZIP BAL HARBOR FL ☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE P
NAME VALERIANO, MARCEL
STREET ADDRESS 290 BAL BAY DR. #104
CITY-ST-ZIP BAL HARBOR FL ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME ALVARADO, JUAN
STREET ADDRESS 290 BAL BAY DR. #104
CITY-ST-ZIP BAL HARBOR FL ☒ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME ESQUILIN, MARIO
STREET ADDRESS 290 BAL BAY DR. #104
CITY-ST-ZIP BAL HARBOR FL ☒ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)