**FILED** 

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90092 023 \*\*\*158.75

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

<ol> <li>Corporation</li> </ol>	MENT # V20465 STAR TRUCKING, INC.									
Principal Place	of Business	Mailing Address				╗ .	t 1891) Bilain tible abili alain A	Lien din Bran di	ait Bidii bidii a	****
104 EDMONTON		P O BOX 789								
BRANDON FL 33511 BRANDON FL 33509-789						-				
US		US					DO NOT WR	ITE IN THIS	SPACE	
						1	Date Incorporated or Qualifed 03/09/1992			
2. Principal Pl	ace of Business	2a. Mailing Address				1	FEI Number		Apı	plied For
21		26					<u>59-3173682</u>	_		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				_	Certifcate of Status Desired		\$8.75 A	
22		27					Octationic of oracion accords		Fee Re	quired
City & State	9	City & State	-		-	-6.	Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip	Cou	ntry		8.	This corporation owes the cur	rønt year Inta		
24	25	29	30				Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent				10.	Name and Address of New	Registered A	Agent	
	<del></del>	•		81	Name	1	D. Combool Cr			
Casteel, Paul Sr.				82	Pa	auı.	D. Casteel Sr. O. Box Number is Not Accept	n blo)		
1312 HATCH PLACE				82	Street Addr	ness (F. ∩⊿ Fi	Edmonton Ln	ane)		
VALRICO FL				83				<del>-</del>	_	
	•				BI	ranc	lon, FL 33511			
				84	City	_		FL	85 Zip C	Code
office or re agent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was au ions of, Section 607.0505, Flori	thorized ida Stati	oby to tutes.	tne corporatio	on's bo	ard of directors. I hereby acce	prine appon	tment as rec	gistered
	Signature, typed or printed name of registered agent		Registerød	Agent	t signature require			DATE		
12.	OFFICERS ANI		13.				ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	PD	☐ DELETE	1.1 Π	TLE					Change	Addition
NAME ,	CASTEEL, PAUL SR.		1.2 N	ME						ł
STREET ADDRESS	104 EDMONTON LN.		1.3 51	1.3 STREET ADDRESS			•			
CITY-ST-ZIP	DRIVINGUE OFFIA		1.4 CI	1.4 CITY-ST-ZIP						
TITLE	ST DELETE			2.1 TITLE					☐ Change	☐ Addition
NAME	THOMPSON, CHERYL		2.2 N	AME						
STREET ADDRESS	104 EDMONTON LN.		2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	BRANDON FL 33511		2.40	ITY-ST	T. 71P			,		
TITLE	J. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	☐ DELETE	3.117		-		<del></del> .		Change	☐ Addition
NAME		<del>_</del> -	3.2 N							
					ADDDECC					
STREET ADDRESS					ADDRESS					•
CITY-ST-ZIP		DELETE	4.1 TI	my-st	1-ZIP			_	Change	☐ Addition
TITLE		C DELETE								
NAME			4.2N							\
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP					7 7 D					
TITLE		<del>-</del>	_	TY-ST	I-ZIP				[7] Ch	
		☐ DELETE	5.1 TT	TLE	1-217	<del>-</del>			Change	Addition
NAME		DELETE	5.1 1T 5.2 N/	TLE AME		-	,		Change	Addition
NAME STREET ADDRESS	-	☐ DELETE	5.1 1T 5.2 N/	TLE AME	ADDRESS				Change	Addition
	-	☐ DELETE	5.1 TT 5.2 N/ 5.3 \$1 5.4 CI	TLE AME TREET TTY-ST	ADDRESS				·	
STREET ADDRESS	-	☐ DELETE	5.1 TT 5.2 N/ 5.3 ST	TLE AME TREET TTY-ST	ADDRESS				Change	Addition

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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, with all other like empowered.

(813) 653–9641

6.3 STREET ADDRESS

SIGNATURE: Sect/Treas.

STREET ADDRESS

Feb. 3, 1999