

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000121720

**FILED**  
**Apr 16, 2007**  
**Secretary of State**

**Entity Name:** BRIGHT STAR INVESTOR GROUP, INC.

**Current Principal Place of Business:**

5114 BALCONES WOODS DRIVE  
307-298  
AUSTIN, TX 78759

**New Principal Place of Business:**

**Current Mailing Address:**

5114 BALCONES WOODS DRIVE  
307-298  
AUSTIN, TX 78759

**New Mailing Address:**

**FEI Number:** 20-3397008      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RICHARD A. BARBER, CPA, P.A.  
803 SHALLOW BROOK AVE  
WINTER SPRINGS, FL 32708      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P/T      ( ) Delete  
Name: GAINES, AKADRIANNA  
Address: 5114 BALCONES WOODS DRIVE, # 307-298  
City-St-Zip: AUSTIN, TX 78759

Title: VP      ( ) Delete  
Name: WINTZ, MAUREEN  
Address: 4795 141 ST WEST  
City-St-Zip: APPLE VALLEY, MN 55124

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AKADRIANNA GAINES

P/T

04/16/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date