



BA20241704390



STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION CORPORATION

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: BA20241704390 Date Filed: 9/24/2024

Entity Details Corporation Name STARLIKE MANAGEMENT CONSULTING, INC. Entity No. 6393150 Formed In **CALIFORNIA** Street Address of Principal Office of Corporation **Principal Address** 10 AVANZARE **IRVINE, CA 92606** Mailing Address of Corporation 10 AVANZARE Mailing Address IRVINE, CA 92606 Attention Street Address of California Office of Corporation Street Address of California Office 10 AVANZARE IRVINE, CA 92606

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| Officer Name | Officer Address | Position(s) |
|--------------|--|---|
| + VAN PHAM | PO BOX 8631 FOUNTAIN VALLEY, CA 92728 | Chief Executive Officer, Chief Financial Officer, Secretary |

Additional Officers

| Officer Name | Officer Address | Position | Stated Position |
|--------------|-----------------|----------|-----------------|
| None Entered | | | |

Directors

| Director Name | Director Address |
|---------------|--|
| + VAN PHAM | PO BOX 8631 FOUNTAIN VALLEY, CA 92728 |

The number of vacancies on Board of Directors is: 0

Agent for Service of Process

Agent Name HIEU PHI

Agent Address 15577 BROOKHURST ST WESTMINSTER, CA 92683

Type of Business

Type of Business CONSULTING

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Labor Judgment

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.

| Electronic Signature | | | | |
|--|------------|--|--|--|
| By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign. | | | | |
| | | | | |
| HILLDIN | 00/04/2024 | | | |
| HIEU PHI | 09/24/2024 | | | |
| Signature | Date | | | |
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