

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000019513

1. Entity Name
 3 STAR, LLC



Principal Place of Business
 2103 CORAL WAY, STE 302
 MIAMI, FL 33145

Mailing Address
 2103 CORAL WAY, STE 302
 MIAMI, FL 33145



05052005No Chg-LLC

CF2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 32-0078401

Applied For
 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, JUANITA
 2103 CORAL WAY, STE 302
 MIAMI, FL 33145

**DO NOT WRITE
 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
 Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, GUSTAVO 2103 CORAL WAY, STE 302 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, MYRIAM NARANJO 2103 CORAL WAY, STE 302 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, JUANITA M 2103 CORAL WAY, STE 302 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, CARLOS G 2103 CORAL WAY, STE 302 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, MARIA CAROLINA 2103 CORAL WAY, STE 302 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000365164
 05/09/05-80027-021 55.00

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 IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Juanita Lopez JUANITA LOPEZ 5/5/05 305 285 5182
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #