

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 28, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90030 042 \*\*\*\*50.00

<b>DOCUMENT # L03000050742</b>					
<b>1. Entity Name</b> STARMAC, LLC					
<b>Principal Place of Business</b> C/O NICOLAS FERNANDEZ, P.A. 780 NW LE JEUNE RD, STE 324 MIAMI, FL 33126			<b>Mailing Address</b> C/O NICOLAS FERNANDEZ, P.A. 780 NW LE JEUNE RD, STE 324 MIAMI, FL 33126		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		01312006 Chg-LLC CR2E083 (11/05)	
<b>4. FEI Number</b> 905706598				Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b>				<input type="checkbox"/> \$5.00 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b> ESQUIRE CORPORATE SERVICES, INC. 780 NE LE JEUNE RD, STE 324 MIAMI, FL 33126			<b>7. Name and Address of New Registered Agent</b>		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
State			State		
Zip Code			Zip Code		
<b>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.</b>					
<b>SIGNATURE</b>					
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when representing)					
DATE					
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2006</b>		Make check payable to Florida Department of State		Make check payable to Florida Department of State	
<b>9. MANAGING MEMBERS/MANAGERS</b>					
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>	MGR MACEDO, JAVIER 780 NW LEJEUNE RD MIAMI, FL 33126	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>	ADDITIONS/CHANGES	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.</b>					
<b>SIGNATURE:</b>					
Signature and typed or printed name of signing managing member, manager, or authorized representative					
Date: 3-4-06					



ATTACHMENT  
30003608

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 17, 2006

STARMAC, LLC  
C/O NICOLAS FERNANDEZ, P.A.  
780 NW LE JEUNE RD, STE 324  
MIAMI, FL 33126

Subject: STARMAC, LLC

Reference Number:

L03000050742

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Because our records reflect the above referenced entity previously applied for its Federal Employer Identification (FEI) Number, it must now include its FEI number on the annual report/uniform business report or attach a photocopy of the FEI number application to the document before we can complete your filing.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JD

ANNUAL REPORTS SECTION

ATTACHMENT  
300031608  
#L03000050742  
NICOLAS FERNANDEZ, P.A.

ATTORNEYS AT LAW  
780 NORTHWEST LE JEUNE ROAD  
SUITE 324 • LE JEUNE CENTRE  
MIAMI, FLORIDA 33126

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E-MAIL isis@nferpa.com

TELEPHONE (305) 461-0404  
TELECOPIER (305) 461-0410

March 13, 2006

Via U.S. Mail

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 6478  
Tallahassee, Florida 32314

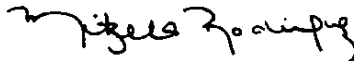
**RE: STARMAC, LLC / Document No. L03000050742**

Dear Sir or Madam:

Enclosed herewith please find the 2006 Uniform Business Report for the above referenced corporation together with check # 8677 made payable to the Department of State in the amount of \$50.00 representing your fees. Of course, if you should have any questions or comments, please do not hesitate to contact this office. Thank you.

Very truly yours,

NICOLAS FERNANDEZ, P.A.



Mitzela Rodriguez, Legal Assistant  
For the Firm

Enclosures