

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# M00000000794

Entity Name: STATETRUST CAPITAL, LLC

Current Principal Place of Business:

STATE TRUST CAPITAL, LLC
800 BRICKELL AVE., #103
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

STATE TRUST CAPITAL, LLC
800 BRICKELL AVE., #103
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0941125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VURGAIT, DAVID
Address: 800 BRICKELL AVE., #103
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: TURNES, JOSE
Address: 800 BRICKELL AVE., #103
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: BENHAMRON, URI
Address: 800 BRICKELL AVE., #103
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: MAYA, JOSE
Address: 800 BRICKELL AVE., #103
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Delete
Name: GARZON, ABRAHAM
Address: 800 BRICKELL AVE., #103
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: CIMBAL, JEFF
Address: 800 BRICKELL AVE., #103
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
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Title: () Change () Addition
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Title: () Change () Addition
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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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DAVID VURGAIT

MGR

05/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date