

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # L93000000443 1. Entity Name FIVE STAR HOLDINGS, L.C.	
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Principal Place of Business 120 S. UNIVERSITY DR., SUITE C PLANTATION, FL 33324	Mailing Address 120 S. UNIVERSITY DR., SUITE C PLANTATION, FL 33324
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DO NOT WRITE IN THIS SPACE



02022006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0504098	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent FEINSTEIN, MARVIN 120 S. UNIVERSITY DR., SUITE C PLANTATION, FL 33324
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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 _____

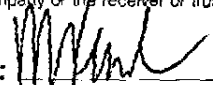
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M MARCO, LISA 2795 PADDOCK RD WESTON, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M CUMMINGS, PAUL M 1428 BRICKELL AVE SUITE 400 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M VOLSKY, GEORGE 1101 BRICKELL AVE SUITE 1400 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M JACOBS, ERIC 13594 SW 58TH AVE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M FEINSTEIN, MARVIN 120-B S UNIVERSITY DR PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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000000534308
05/08/06-80005-024 50.00

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 606, Florida Statutes.

SIGNATURE:  **Marvin Feinstein** 4/17/06 954 423-9747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #