

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000000102

**Entity Name:** 5IVE STAR, LLC

**Current Principal Place of Business:**

1800 NE 27TH ST.  
FORT LAUDERDALE, FL 33306

**Current Mailing Address:**

1800 NE 27TH ST.  
FORT LAUDERDALE, FL 33306

**FEI Number:** 82-0588625

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BABB, ELBERT  
1800 NE 27TH ST.  
FORT LAUDERDALE, FL 33306 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name BABB, ELBERT  
Address 1800 NE 27TH ST.  
City-State-Zip: FORT LAUDERDALE FL 33306

Title MGR  
Name CORISH, ROBERT  
Address 918 NORIDGE TRAIL  
City-State-Zip: PORT WASHINGTON WI 53074

Title MGR  
Name HALPERT, DAVE  
Address 5737 VIA DEL LA PLATA CR  
City-State-Zip: DELRAY BEACH FL 33484

Title MGR  
Name BRUKOFF, CHRISTOPHER  
Address 1105 CASEY KEY RD  
City-State-Zip: NOKOMIS FL 34275

Title MGR  
Name WLODARSKI, JOHN  
Address 2220 S. MISTY COURT  
City-State-Zip: NEW BERLIN WI 53151

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ELBERT BABB

MGRM

04/02/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date