

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002545

FILED  
Mar 15, 2006  
Secretary of State

Entity Name: STARLINE ONLINE SHIPPING LLC

## Current Principal Place of Business:

4397 N. STATE RD. SEVEN  
LAUDERDALE LAKES, FL 33319 US

## New Principal Place of Business:

## Current Mailing Address:

4901 UMBRELLA TREE LANE  
TAMARAC, FL 33319

## New Mailing Address:

FEI Number: 65-0988173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LISA ANN, EARLE  
4901 UMBRELLA TREE LANE  
TAMARAC, FL 33319 US

## Name and Address of New Registered Agent:

EARLE, STAFFORD  
4901 UMBRELLA TREE LANE  
TAMARAC, FL 33319 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: STAFFORD EARLE

03/15/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: EARLE, STAFFORD  
Address: 4901 UMBRELLA TREE LANE  
City-St-Zip: TAMARAC, FL 33319 US

Title: MGR ( ) Delete  
Name: EARLE, LISA A  
Address: 4901 UMBRELLA TREE LANE  
City-St-Zip: TAMARAC, FL 33319 US

Title: MGR ( ) Delete  
Name: EARLE, SIMONE  
Address: 4901 UMBRELLA TREE LN.  
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: MGR ( ) Delete  
Name: STRIEMER, NATHAN  
Address: 4901 UMBRELLA TREE LN.  
City-St-Zip: TAMARAC, FL 33319 US

Title: MGR ( ) Delete  
Name: EARLE, JASON  
Address: 4901 UMBRELLA TREE LANE  
City-St-Zip: TAMARAC, FL 33319

Title: MGR ( ) Delete  
Name: EARLE, STEPHEN  
Address: 4901 UMBRELLA TREE LANE  
City-St-Zip: TAMARAC, FL 33319

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: EARLE, STAFFORD  
Address: 4901 UMBRELLA TREE LANE  
City-St-Zip: TAMARAC, FL 33319 US

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 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: STAFFORD EARLE

MGRM

03/15/2006

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