2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L00000006013

1. Entity Name
BLOOMSTAR, L.C.

Principal Place of Business	Mailing Address
1866 NW 82 AVE MIAMI, FL 33126	P O BOX 226530 MIAMI, FL 33222

DO NOT WRITE IN THIS SPACE

02052008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
65-1010961	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PINEROS, JUAN I
1866NW 82 AVE
MIAMI, FL 33126

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IN THIS SPACE

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	PINEROS, JUAN I
STREET ADDRESS	1866 NW 82ND AVE
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

U00000821436
02/19/08-80023-017 138.75

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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.

SIGNATURE:_____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #