

# 2001 UNIFORM BUSINESS REPORT (UBR)

01/15/01 AF

DOCUMENT # L00000009254

1. Entity Name

STAR INVESTMENT GROUP, L.L.C.

FILED

01 APR 11 AM 8:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR  
FORT LAUDERDALE FL 33308

Mailing Address

4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR  
FORT LAUDERDALE FL 33308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1028131

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSENBERG, ARTHUR R

4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR  
FORT LAUDERDALE FL 33308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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 \$50.00  
Make Check Payable to Department of State

600004035536--8  
-04/20/01--01064--022  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR  
NAME RENZULLI, EDWARD  
STREET ADDRESS 4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR  
CITY-ST-ZIP FORT LAUDERDALE FL 33308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MGR  
NAME MURDJEFF, MITCHELL  
STREET ADDRESS 4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR  
CITY-ST-ZIP FORT LAUDERDALE FL 33308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Edward M. Renzulli

Date

Daytime Phone #

4-4-01 (954) 776-9900

CR2E083 (11/00)