


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90035 021 ****50.00

DOCUMENT # L01000013786		
1. Entity Name JEM STAR ENTERPRISES LLC		

Principal Place of Business 610 N. DIXIE HWY LANTANA, FL 33462	Mailing Address 610 N. DIXIE HWY LANTANA, FL 33462
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2. Principal Place of Business - No P.O. Box # 1801 South Federal Highway Suite 300 Delray Beach, FL 33483	3. Mailing Address 1801 South Federal Highway Suite 300 Delray Beach, FL 33483
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04272007 Chg-LLC CR2E083 (12/06)

Zip	Country	Zip	Country
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4. FEI Number 65-1131009	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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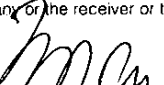
6. Name and Address of Current Registered Agent PARK, MICHAEL G 610 N. DIXIE HWY LANTANA, FL 33462	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1801 South Federal Highway Suite 300 City Delray Beach, FL 33483 FL Zip Code	
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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  Michael G. Park, Esq. DATE 4/27/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	
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Filing Fee is \$50.00 Due by May 1, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DESALVO, MICHAEL 610 N. DIXIE HWY LANTANA, FL 33462 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1801 South Federal Highway Suite 300 Delray Beach, FL 33483 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLDSTEIN, JON 610 N. DIXIE HWY LANTANA, FL 33462 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1801 South Federal Highway Suite 300 Delray Beach, FL 33483 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  Michael G. Park, Esq. <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>	Date 4/27/07 Daytime Phone # 561-454-7404