

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000012082

1. Entity Name
STELLAR DUTY FREE, LLC



Principal Place of Business

5402 BEAUMONT CENTER BLVD.
SUITE # 108
TAMPA, FL 33634

Mailing Address

5402 BEAUMONT CENTER BLVD.
SUITE # 108
TAMPA, FL 33634



04022005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1151071

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

STACKHOUSE, SUSAN H
5402 BEAUMONT CENTER BLVD.
SUITE # 108
TAMPA, FL 33634

**DO NOT WRITE
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

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

| | |
|-----------------|----------------------------|
| TITLE | MGR |
| NAME | STACKHOUSE, SUSAN H |
| STREET ADDRESS | 5402 BEAUMONT CENTER BLVD. |
| CITY - ST - ZIP | TAMPA, FL 33634 |

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

4/13/2005

Date

(813) 396-3639

Daytime Phone #