

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000015904

1. Entity Name
SUNSTAR THEATRES SARASOTA LLC



Principal Place of Business
5600 NORTHWEST 32 AVENUE
MIAMI, FL 33142 US

Mailing Address
5600 NORTHWEST 32 AVENUE
MIAMI, FL 33142 US

2. Principal Place of Business - No P.O. Box #
5521 FWITVLL 12

3. Mailing Address
9760 NW 98 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
SARASOTA FLA

City & State
MIAMI, FLA.

Zip 34232

Country

Zip 33176

Country

6. Name and Address of Current Registered Agent

CLEMENT, MARK
5600 NORTHWEST 32 AVENUE
MIAMI, FL 33142

Name BARNET KAUFMAN

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

9760 NW 98 ST.

City MIAMI FL Zip Code 33176

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)

3-26-08

DATE

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10.

ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CLEMENT, MARK 770 RIVERSIDE DR CORAL SPRINGS, FL 33071	<input checked="" 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	P KRAMS, STEVEN 5600 NORTHWEST 32 AVENUE MIAMI, FL 33142	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1998 NO 150 ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MIAMI, FLA 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KAUFMAN, BAYNEY 5600 NORTHWEST 32 AVENUE MIAMI, FL 33142	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9760 NW 98 ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MIAMI, FLA 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CLEMENT, MARK 5600 NORTHWEST 32 AVENUE MIAMI, FL 33142	<input checked="" 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	S VACCA, OSVALDO 5600 NORTHWEST 32 AVENUE MIAMI, FL 33142	<input checked="" 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90229 030 ***138.75

60020271



03062008 Chg-LLC CR2E083 (12/06)

4. FEI Number
75-3068533 Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional
Fee Required

7. Name and Address of New Registered Agent

Name BARNET KAUFMAN

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

9760 NW 98 ST.

3-26-08

DATE

Make check payable to
Florida Department of State

305-274
6529