

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 21, 2008 8:00 am**  
**Secretary of State**

07-21-2008 90081 045 \*\*\*138.75

**DOCUMENT # L02000017526**

1. Entity Name  
**ALLSTAR CHARTERS, LLC**



Principal Place of Business  
**1820 SW 21ST TERR  
CAPE CORAL, FL 33991**

Mailing Address  
**1820 SW 21ST TERR  
CAPE CORAL, FL 33991**

**50008606**



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07142008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number

**30-0094003**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SPIEGEL & UTRERA, P.A.  
1820 SW 21ST TERR  
CAPE CORAL, FL 33991**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Julia Keyser*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

*July 18, 2008*

DATE

**FILE NOW!!! FEE IS \$138.75  
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
KREJCI, ZDENKA  
1820 SOUTHWEST 21ST TERRACE  
CAPE CORAL, FL 33991** ☐ 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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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:

*Julia Keyser*

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

*July 18, 2008*

DATE

Daytime Phone #

## ATTACHMENT

50008606

7/14/08

## CORPORATE DETAIL RECORD SCREEN

8:25 AM

NUM: ~~L02000017526~~ ST: FL ACTIVE/FL LIM LIAB FLD: 07/12/2002  
TOTAL CONTR: 0.00 FEI#: 30-0094003

NAME : ALLSTAR CHARTERS, LLC  
PRINCIPAL: 1820 SW 21ST TERR  
ADDRESS CAPE CORAL, FL 33991  
RA NAME : SPIEGEL & UTRERA, P.A.  
RA ADDR : 1820 SW 21ST TERR  
CAPE CORAL, FL 33991  
ANN REP : (2005) N 04/30/05 (2006) N 05/03/06 (2007) N 07/10/07

CHANGED: 04/08/03

ADDR CHG: 04/08/03

7/14/08

## MANAGER/MEMBER DETAIL SCREEN

8:25 AM

CORP NUMBER: L02000017526 CORP NAME: ALLSTAR CHARTERS, LLC  
TITLE: MGR NAME: KREJCI, ZDENKA  
1820 SOUTHWEST 21ST TERRACE  
CAPE CORAL, FL 33991