

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

9/22/2003-90104-033-\$50.00-\$50.00

APPROVAL
AND
FILING

03 OCT 16 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000026138

1. Entity Name
STARZILLA LLC



Principal Place of Business

150 NORTH UNIVERSITY DRIVE
SUITE 200
PLANTATION FL 33324
US

Mailing Address

150 NORTH UNIVERSITY DRIVE
SUITE 200
PLANTATION FL 33324
US

2. Principal Place of Business

1800 NW 65th Ave.
Suite, Apt. #, etc.

3. Mailing Address

Same



☒ CHECK HERE IF MAKING CHANGES

City & State

Plantation, FL
Zip 33313 Country Broward

City & State

Same
Zip Country

4. FEI Number

13-4215624

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

BREIT, RICHARD H
150 NORTH UNIVERSITY DRIVE
SUITE 200
PLANTATION FL 33324

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

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 Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
Lerry Van Dusseldorp Manager
1800 NW 65 Ave
Plantation FL 33313

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
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 REQUIRED RICHARD BREIT

9/12/03

954-452-1144

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

Date

Daytime Phone #

CR2E083 (4/03)

000476

law offices

BREITGROSSMAN

a partnership of professional associations

150 North University Drive Ste 200
Plantation, FL 33324-2008
Telephone 954.452.1144
Facsimile 954.452.3311

October 13, 2003

E-mail RBreit@BreitGrossman.com

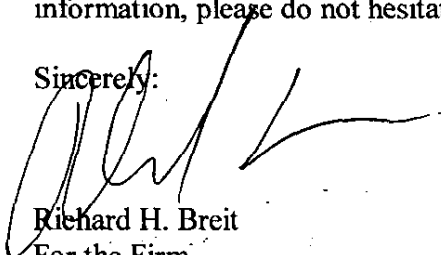
Division of Corporations
PO Box 6478
Tallahassee FL 32314-6478

Re: Starzilla LLC

Dear Sir or Madam:

We are returning the Limited Liability Company Uniform Business Report for the above named company with the employer-identification number included in box 4 as you requested. As this has been accomplished within the 30 day window, please file the report. If you need any additional information, please do not hesitate to contact me.

Sincerely:



Richard H. Breit

For the Firm

RHB/em

enclosure

cc: Larry Van Dusseldorp