

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006410

Entity Name: FIVE STAR MARKETING, LLC

FILED
Jan 30, 2006
Secretary of State

Current Principal Place of Business:

940 TRADEWINDS BEND
WESTON, FL 33309 US

New Principal Place of Business:

6301 NW 5 WAY
SUITE 2900
FORT LAUDERDALE, FL 33309 US

Current Mailing Address:

940 TRADEWINDS BEND
WESTON, FL 33309 US

New Mailing Address:

6301 NW 5 WAY
SUITE 2900
FORT LAUDERDALE, FL 33309 US

FEI Number: 41-2091301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORRAS, ELIAS
940 TRADEWINDS BEND
WESTON, FL 33327 US

Name and Address of New Registered Agent:

PORRAS, ELIAS
6301 NW 5 WAY
SUITE 2900
FORT LAUDERDALE, FL 33309 US

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.

SIGNATURE: ELIAS PORRAS

01/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PORRAS, ELIAS
Address: 940 TRADEWINDS BEND
City-St-Zip: WESTON, FL 33327 US

Title: MGR () Delete
Name: SCHAGRIN, RONALD A
Address: 2841 NE 24TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33305 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PORRAS, ELIAS
Address: 6301 NW 5 WAY, SUITE 2900
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ELIAS PORRAS

MGR

01/30/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date