

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 12, 2007 08:00 AM
Secretary of State**

DOCUMENT # L03000008585

1. Entity Name
STARKS HOLDINGS, LLC



Principal Place of Business
**18557 S.W. 104 AVENUE
UNIT 2F
MIAMI, FL 33157**

Mailing Address
**18557 S.W. 104 AVENUE
UNIT 2F
MIAMI, FL 33157**



01022007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2325366

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STARK, STEVE
6753 S.W. 138 STREET
MIAMI, FL 33158**

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	STARK, STEVE
STREET ADDRESS	6753 S.W. 138 ST
CITY-ST-ZIP	MIAMI, FL 33158
TITLE	MGRM
NAME	STARK, MARGITA
STREET ADDRESS	6753 S.W. 138 ST
CITY-ST-ZIP	MIAMI, FL 33158
TITLE	MGRM
NAME	STARK, ALAN
STREET ADDRESS	6363 S.W. 132 STREET
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	MGRM
NAME	STARK, DORENE
STREET ADDRESS	6363 S.W. 132 STREET
CITY-ST-ZIP	MIAMI, FL 33156

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01/12/07-80054-005 50.00

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Steve Stark*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/8/07 *786-573-5050*
Date Daytime Phone #