

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90260 047 ****50.00

DOCUMENT # L03000012927

1. Entity Name
STAR TEQUESTA, LLC



Principal Place of Business
**3300 NORTH FEDERAL HIGHWAY SUITE 250
FT. LAUDERDALE, FL 33306**

Mailing Address
**3300 NORTH FEDERAL HIGHWAY SUITE 250
FT. LAUDERDALE, FL 33306**



02012006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1185631

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**NEAL, TIMOTHY
3300 NORTH FEDERAL HIGHWAY SUITE 250
FT. LAUDERDALE, FL 33306**

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME NEAL, TIMOTHY
STREET ADDRESS 3300 NORTH FEDERAL HIGHWAY SUITE 250
CITY-ST-ZIP FT. LAUDERDALE, FL 33306

TITLE MGRM
NAME NEAL, SHAYNA
STREET ADDRESS 3300 NORTH FEDERAL HIGHWAY SUITE 250
CITY-ST-ZIP FT. LAUDERDALE, FL 33306

TITLE MGRM
NAME BERLIN ALTMAN, RICHARD
STREET ADDRESS 3300 NORTH FEDERAL HIGHWAY SUITE 250
CITY-ST-ZIP FT. LAUDERDALE, FL 33306

TITLE MGRM
NAME ALTMAN, ANDREA
STREET ADDRESS 3300 NORTH FEDERAL HIGHWAY SUITE 250
CITY-ST-ZIP FT. LAUDERDALE, FL 33306

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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, OR AUTHORIZED REPRESENTATIVE

Date Daytime Phone #

3-15-06 912-638-2511