2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Apr 30, 2005 08:00 AM Secretary of State DOCUMENT # L03000030304 SHINY STAR, LLC Principal Place of Business Mailing Address **420 JEFFERSON AVENUE** 420 JEFFERSON AVENUE MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 US 04212005 No Cha-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0702494 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION DO NOT WRITE 701 BRICKELL AVENUE 28TH FLOOR IN THIS SPACE MIAMI, FL 33131 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. Lam familiar with, and accept the obligations of registered agent. 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, 2005 MANAGING MEMBERS/MANAGERS TITLE MGR Hirijijijijiji3449:46 NAME AMADEO, FRANK 04/30/05-80015-018 150.00 STREET ADDRESS 420 JEFFERSON AVENUE CITY-ST-ZIP MIAMI BEACH, FL 33139 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 it made under oath, that I am a managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

ME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Amadeo

4-25-05

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Daytime Phone #