## **2007 LIMITED LIABILITY COMPANY**

## **ANNUAL REPORT**

DOCUMENT #L03000045414

SIGNATURÉ:

## **FILED** Jan 22, 2007 8:00 am Secretary of State 01-22-2007 90145 001 \*\*\*\*50.00

1. Entity Name SUNSTAR THEATRE HOLDINGS, LLC							01-22	2007	J014J (		30.00	
Principal Place	e of Business	Mailing Address									45	
5600 NW 32		5600 NW 32 AVE			- 1				100	043	ス0	
MIAMI, FL 33142		MIAMI, FL 33142						· - (			)	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address			$\dashv$							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01112007	Chg-Ll			183 (12/06)		
City & State		City & State				4. FEI Number 20-0406095					pplied For ot Applicable	
Zip	Country	Zip	atry		5 Certificate of Status Desired   \$				\$5.00 Ad Fee Require	ditional		
	6. Name and Address of Curren	t Registered Agent				7. Name and	i Address o	f New R	egistered .	Agent		
KRAMS, STEVEN				Name								
5600 NW 3			Street Add			dress (P.O. Box Number is Not Acceptable)						
MIAMI, FL	33142					<del></del>						
			City			· · · · · · · · · · · · · · · · · · ·		FL	Zip Coo	ie		
8. The above	named entity submits this statement	ed office or re	gistere	ed agent, or bo	oth, in the St	ate of Flo		familiar with	and accept			
the obligations of registered agent.												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (INOTE: Registered Agent signature required when renstiting)  DATE												
	ling Fee is \$50.00 ue by May 1, 2007					Make check payable to Fiorida Department of State						
9.	MANAGING MEME	ERS/MANAGERS	10.				ADD	DITIONS/	CHANGES			
TITLE	P KRAMS, STEVEN	☐ Delete	TITL						1 -	Change	Addition	
name Street address	5600 NW 42 AVE			EET ADDRESS	50	600 N	$\omega$ $z$	32 A	عالات			
CETY-ST-ZIP	MIAMI, FL 33142		CITY	'-ST-ZIP	V &	,,,,	_					
TITLE	٧	☐ Delete	TITL	£			0			Change	Addition	
NAME	KAUFMAN, BARNEY		NAM	Œ	5	600 N		32%	00			
STREET ADDRESS City-St-Zip	5600 NW 42 AVE MIAMI, FL 33142			EET ADORESS '-ST-ZIP				/ F	_			
TITLE	V	☐ Delete	FITL							Change	Addition	
NAME	CLEMENT, MARK		NAM	Œ	_	600 N	Wa	1 14	15	- ·	4	
STREET ADDRESS	5600 NW 42 AVE			EET ADDRESS	1	buu w	- 0					
CITY-ST-ZIP	MIAMI, FL 33142			/-ST-ZIP			*****	_				
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STREET ADDRESS	5600 NE 42 AVE		1	EET ADDRESS	V	1000 M		5V 1				
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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 cath; 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MENTER, MANAGER, OR AUTHORIZED REPRESENTATIVE DOIS