

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 14, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000019659

1. Entity Name
A 50 STAR LLC



Principal Place of Business

**3140 S. W. 19 STREET
BAY 560
PEMBROKE PARK, FL 33009 US**

Mailing Address

**BOX 816392
HOLLYWOOD, FL 33081 US**

DO NOT WRITE IN THIS SPACE

07072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
05-0599576

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**OCHS, BRAD S
P.O. BOX 816392
HOLLYWOOD, FL 33081**

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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 September 6, 2006**

U000000570343
07/14/06-80010-008 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
OCHS, LAUREN L
3140 S. W. 19 STREET BAY 560
PEMBROKE PARK, FL 33009**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
OCHS, BRAD S
3140 S. W. 19 STREET BAY 560
PEMBROKE PARK, FL 33009**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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: *Lochs*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

7/14/06 (954) 9898651