2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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Apr 04, 2005 8:00 am
Secretary of State
03-11-2005 90056 050 ****50.00

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01062005 Chg-LLC CR2E083 (10/03)

DOCUMENT # L04000025714

1. Entity Name
JEWSTAR LLC

Principal Place of Business	Mailing Address
2501 BAY AVENUE MIAMI BEACH, FL 33140	2501 BAY AVENUE MIAMI BEACH, FL 33140

2. Principal Place of Business	3. Mailing Address
2700 Bay Ave	2700 Bay Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami Beach	City & State: Miami Beach
Zip: 33140 Country: Dade	Zip: 33140 Country: Dade

4. FEI Number: 20-112-8016 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FELDMAN, PAUL 407 LINCOLN ROAD STE. 701 MIAMI BEACH, FL 33139	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 ______________________________ DATE

Filing Fee is $50.00, Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM RESNICK, ANDREW J 2501 BAY AVENUE MIAMI BEACH, FL 33140	☐ Delete	MGRM Resnick, Andrew J 2700 Bay Ave Miami Beach Fla. 33140	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LINDE, STEVEN 2501 BAY AVENUE MIAMI BEACH, FL 33140	☐ Delete	MGRM Linde, Steven 2700 Bay Ave Miami Beach Fla. 33140	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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 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] Andrew Resnick 2-28-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #