

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028083

FILED  
Jun 29, 2005  
Secretary of State

Entity Name: SILVER STAR ENDEAVORS, LLC

## Current Principal Place of Business:

6357 OAK MEADOW BEND  
ORLANDO, FL 32819

## New Principal Place of Business:

116 S. ORANGE AVENUE  
ORLANDO, FL 32801

## Current Mailing Address:

6357 OAK MEADOW BEND  
ORLANDO, FL 32819

## New Mailing Address:

116 S. ORANGE AVE  
ORLANDO, FL 32801

FEI Number: 47-0940385      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

SILVA, KERMIT J  
6357 OAK MEADOW BEND  
ORLANDO, FL 32819      US

## Name and Address of New Registered Agent:

GITTO, JEFFREY S  
5508 MIAMI AVENUE  
TAMPA, FL 33604      US

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.

SIGNATURE: JEFFREY GITTO

06/29/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: SILVA, KERMIT J  
Address: 6358 OAK MEADOW BEND  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES:

Title: MGRM      (X) Change      ( ) Addition  
Name: GITTO, JEFFREY S  
Address: 5508 MIAMI AVE  
City-St-Zip: TAMPA, FL 33604

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JEFFREY GITTO

MGRM

06/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date