2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 26, 2006 08:00 AM Secretary of State

ANNUAL REPORT					Secretary of State				
DOCUMENT # L04000090876 1. Entity Name STAR PROPERTY XIII, LLC							·		
Principe) Place of Business 3750 WEST FLAGLER STREET MIAMI, FL 33134		Majing Address 3750 WEST FLAGLER STREET MIAMI, FL 33134							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03132006	Chg-LLC	CR2E08	33 (11/05)		
City & State		City & State		4. FEI Number 20-1997	954		No	plied For x Applicable	
Z ip	Country	Zip	Coun	try	[<u></u>	Status Desired	۶	5.00 Add ee Require	iltional d
6. Name and Address of Current		Registered Agent		N-2	7. Name and Address of New Registered Agent				
NICOLAS 3750 WES MIAMI, FL	ESTRELLA JR., P.A. ST FLAGLER STREET . 33134			Name Street Address (i	P.O. Bax Number	is Not Acceptable)		
				City	· · · · · · · · · · · · · · · · · · ·		FL	Zip Cod	9
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 algorithms registered when remarking) DATE									
Fi D	iling Fee is \$50.00 ue by May 1, 2006						check pa		
9.	MANAGING MEMBER	S/MANAGERS	10.			ADDITIONS/	CHANGES		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR ESTRELLA, NICOLAS 3750 WEST FLAGLER STREET MIAMI, FL 33134	☐ Delate		2	í	2000000 25 /86/3 5	34538	□ Change 107 50.	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-EP		□ Delete		T T		· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Celote	•					Change	☐ Addillion
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	•)				☐ Change	□ Additian
TITLE NAME SIREET ADDRESS GITY-ST-ZIP		□ Deleta	•	ľ				☐ Change	☐ Addition
Title Name Street address City-St-ZP		☐ Delete	CHY-	T AUDRESS ST-ZIP				Change	☐ Addition
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.									