2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

FILED
May 01, 2008 8:00 am
Secretary of State
05-01-2008 90026 020 ***138.75

DOCUMENT # L05000025391

1. Entity Name
LUCKY STAR REALTY, LLC

Principal Place of Business
12515 N. KENDALL DR, STE 328
MIAMI FL 33186

Mailing Address
12515 N. KENDALL DR, STE 328
MIAMI FL 33186

2. Principal Place of Business - No P.O. Box #
14261 SW 120th Street
Suite # 113
Miami, FL 33186

3. Mailing Address
14261 SW 120th Street
Suite # 113
Miami, FL 33186

1st MOORE CR2E083 (10/07)

4. FEI Number 35-2249862 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
BALESTENA, ANTONIO
12515 N. KENDALL DR, STE 328
MIAMI FL 33186

7. Name and Address of New Registered Agent
Name
Street
14261 SW 120 ST, STE 113
Miami, FL 33186
City

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008, Fee Will Be $538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FERNANDEZ, JORGE 12515 N. KENDALL DR, STE 328 MIAMI FL 33186	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	14261 SW 120 ST, STE 113 Miami, FL 33186
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: ______________________ 04/11/08 (305) 598-0053
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #