


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 11, 2007 08:00 AM
Secretary of State


DOCUMENT # L05000063748

1. Entity Name
SILVER SEASTAR COMPANY, LLC



Principal Place of Business 2435 RIBBLE ST. NORTH PORT, FL 34286 US	Mailing Address 1181 S. SUMTER BLVD. #243 NORTH PORT, FL 34287 US
--	---

DO NOT WRITE IN THIS SPACE



03212007 No Chg.-LLC CR2E083 (11/05)

4. FEI Number 20-3077282	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**VAZQUEZ, MARIO A
 2435 RIBBLE ST.
 NORTH PORT, FL 34286**

DO NOT WRITE 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VAZQUEZ, MARIO A 2435 RIBBLE ST. NORTH PORT, FL 34286
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

1100000773687
 09/11/07-80002-022 50.00

DO NOT WRITE 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:  **13 APR 07** (941) 692-0475
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #