## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000091778

Name:

Address:

City-St-Zip:

LEDER, SEAN M

4755 TECHNOLOGY WAY - SUITE 202

BOCA RATON, FL 334313338 US

Entity Name: STJ SUNTECH MANAGEMENT, LLC

FILED Mar 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4755 TECHNOLOGY WAY SUITE 202 BOCA RATON, FL 334313338 US **Current Mailing Address: New Mailing Address:** 4755 TECHNOLOGY WAY SUITE 202 BOCA RATON, FL 334313338 US FEI Number: 20-3501202 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEDER, SEAN M 4755 TÉCHNOLOGY WAY SUITE 202 BOCA RATON, FL 334313338 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete STJ MANAGEMENT INC., Name: Name: 4755 TECHNOLOGY WAY - SUITE 202 Address: Address: City-St-Zip: BOCA RATON, FL 334313338 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: LEDER, JOSHUA D Name: Address: 4755 TECHNOLOGY WAY - SUITE 202 Address: City-St-Zip: BOCA RATON, FL 334313338 US City-St-Zip: Title: PRES () Delete Title: () Change () Addition LEDER, JOSHUA D Name: Name: 4755 TECHNOLOGY WAY - SUITE 202 Address: Address: City-St-Zip: BOCA RATON, FL 334313338 US City-St-Zip: Title: VΡ ( ) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: SEAN M. LEDER MGR 03/20/2009