

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101522

Entity Name: STARWIRE, LLC

FILED  
Apr 26, 2006  
Secretary of State

**Current Principal Place of Business:**

424 E CENTRAL BLVD., #194  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

424 E CENTRAL BLVD., #194  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 20-3692396

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAGE, THERESA  
4985 DAN SMITH RD  
ST CLOUD, FL 34771 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM ( ) Delete  
Name: PAGE, THERESA  
Address: 424 E. CENTRAL BLVD., #194  
City-St-Zip: ORLANDO, FL 32801

Title: MGRM ( ) Delete  
Name: PERSON, TJ  
Address: 424 E CENTRAL BLVD., #194  
City-St-Zip: ORLANDO, FL 32801

Title: MGRM ( ) Delete  
Name: SHEPARD, BRYAN  
Address: 424 E CENTRAL BLVD., #194  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: THERESA PAGE

MGRM

04/26/2006

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