

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001134

**FILED**  
**Apr 09, 2007**  
**Secretary of State**

**Entity Name:** STS SHARED SERVICES LLC

**Current Principal Place of Business:**

1248 CAMELLIA LANE  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1248 CAMELLIA LANE  
WESTON, FL 33326

**New Mailing Address:**

**FEI Number:** 20-4049856

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JORGE, CARVAJAL  
1248 CAMELLIA LANE  
WESTON, FL 33326 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: CARVAJAL, JORGE  
Address: 1248 CAMELLIA LANE  
City-St-Zip: WESTON, FL 33326

Title: MGRM ( ) Delete  
Name: RON, SCHNEPP  
Address: 4632 RIDGECREST COURT  
City-St-Zip: DAVIE, FL 33328

**ADDITIONS/CHANGES:**

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: JORGE CARVAJAL

MGRM

04/09/2007

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