

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000046694

FILED  
Mar 13, 2009  
Secretary of State

Entity Name: FIVE STAR BUSINESS GROUP, LLC

## Current Principal Place of Business:

9432 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32877

## New Principal Place of Business:

10769 BEACH BLVD  
14  
JACKSONVILLE, FL 32246

## Current Mailing Address:

9432 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32877

## New Mailing Address:

10769 BEACH BLVD  
14  
JACKSONVILLE, FL 32246

FEI Number: 20-8969014

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAZZAQ, MOHAMMAD  
9432 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32877 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: RAZZAQ, MOHAMMAD  
Address: 9432 SOUTH ORANGE BLOSSOM TRAIL  
City-St-Zip: ORLANDO, FL 32877

Title: MGRM ( ) Delete  
Name: KHAN, ZAFAR  
Address: 9432 SOUTH ORANGE BLOSSOM TRAIL  
City-St-Zip: ORLANDO, FL 32877

Title: MGRM ( ) Delete  
Name: AHMED, MIRZA M  
Address: 9432 SOUTH ORANGE BLOSSOM TRAIL  
City-St-Zip: ORLANDO, FL 32877

Title: MGRM ( ) Delete  
Name: ALI, RIAZ  
Address: 9432 SOUTH ORANGE BLOSSOM TRAIL  
City-St-Zip: ORLANDO, FL 32877

Title: MGRM ( ) Delete  
Name: MAHMOOD, QAISAR  
Address: 9432 SOUTH ORANGE BLOSSOM TRAIL  
City-St-Zip: ORLANDO, FL 32877

## 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:

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 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: ZAFAR KHAN

P

03/13/2009

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