

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000006655

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: STAR MANAGEMENT ASSOCIATES, LLC

## Current Principal Place of Business:

201 SOUTH BISCAYNE BLVD  
SUITE 1700  
MIAMI, FL 33131

## New Principal Place of Business:

5255 NW 159TH STREET  
MIAMI, FL 33014

## Current Mailing Address:

201 SOUTH BISCAYNE BLVD  
SUITE 1700  
MIAMI, FL 33131

## New Mailing Address:

5255 NW 159TH STREET  
MIAMI, FL 33014

FEI Number: 65-0954887

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIAMI CENTER REGISTERED AGENTS INC  
201 SOUTH BISCAYNE BLVD., STE 1700  
MIAMI, FL 33131 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/MEMBERS:

Title: MGR ( ) Delete  
Name: IACOVELLI, CAROL  
Address: 46 STAR ISLAND DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR ( ) Delete  
Name: IACOVELLI, CAROL  
Address: 46 STAR ISLAND DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

## 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 Section 119.07(3)(i), 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: CAROL IACOVELLI

MGR

04/28/2005

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