

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003178

**FILED**  
**Apr 13, 2004**  
**Secretary of State**

**Entity Name:** PRISTAR LLC

**Current Principal Place of Business:**

13400 PERIWINKLE AVE  
SEMINOLE, FL 33776

**New Principal Place of Business:**

1809 N. BLACK HORSE PIKE, B-3  
WILLIAMSTOWN, NJ 08094

**Current Mailing Address:**

13400 PERIWINKLE AVE  
SEMINOLE, FL 33776

**New Mailing Address:**

1809 N. BLACK HORSE PIKE, B-3  
WILLIAMSTOWN, NJ 08094

**FEI Number:** 74-3068298

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLANCO, LAVERA  
13400 PERIWINKLE AVE  
SEMINOLE, FL 33776

**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: BELL, DOUGLAS  
Address: 50 FOX MEADOW DR  
City-St-Zip: SICKLERVILLE, NJ 08081

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BELL, DOUGLAS  
Address: 53 FOX MEADOW DR  
City-St-Zip: SICKLERVILLE, NJ 08081

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: DOUGLAS BELL

MGR

04/13/2004

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