

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000368

FILED
Jul 18, 2007
Secretary of State

Entity Name: TURQUAZ MARINE GROUP, LLC

Current Principal Place of Business:

DESIGN CENTER OF THE AMERICAS
1855 GRIFFIN ROAAD, 4TH FL, SHRM C-482
DANIA, FL 33004

New Principal Place of Business:

Current Mailing Address:

DESIGN CENTER OF THE AMERICAS
1855 GRIFFIN ROAAD, 4TH FL, SHRM C-482
DANIA, FL 33004

New Mailing Address:

FEI Number: 54-2116692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TURQUAZ MARINE GROUP, LLC
DESIGN CENTER OR THE AMERICAS
4TH FL, SHOWROOM C-462, 1855 GRIFFIN RD.
DANIA, FL 33004 US

Name and Address of New Registered Agent:

YILDIZLAR, MATT
DESIGN CENTER OR THE AMERICAS
4TH FL, SHOWROOM C-462, 1855 GRIFFIN RD.
DANIA, FL 33004 US

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: MATT YILDIZLAR

07/18/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: STAR VENTURE GROUP., LLC
Address: 106 CORPORATE PARK DRIVE, SUITE 311
City-St-Zip: WHITE PLAINS, NY 10604

ADDITIONS/CHANGES:

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: MATT YILDIZLAR

MGR

07/18/2007

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