


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # M98000000947 1. Entity Name SOUTH BEACH TRISTAR CAPITAL, LLC	
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Principal Place of Business C/O DAVID EDELSTEIN 590 MADISON AVE 21ST FLR SUTTON EAST NEW YORK, NY 10022	Mailing Address 2665 SOUTH BAYSHORE DR. SUITE 1002 MIAMI, FL 33133
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03162005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 13-4020454	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ROSE, ELLEN ONE S.E. THIRD AVE STE 2400 MIAMI, FL 33135	DO NOT WRITE IN THIS SPACE
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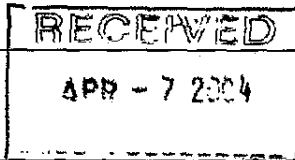
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

U00000324064
04/22/05-80079-003 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LINCOLNSTAR CAPITAL, LLC C/O DAVID 590 MADISON AVE 21ST FLR. NEW YORK, NY 10022
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *David Edelstein* 5/17/05 2027-521-4488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #