

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000122103

**Entity Name:** STARRY NIGHT ENTERPRISES LLC

**Current Principal Place of Business:**

901 SURFSIDE BOULEVARD  
SURFSIDE, FL 33154

**Current Mailing Address:**

901 SURFSIDE BOULEVARD  
SURFSIDE, FL 33154 US

**FEI Number:** 20-8289656

**Certificate of Status Desired:** No

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

KING, RUSSELL L  
FOUR SEASON TOWER 15TH FLOOR  
1441, BRICKELL AVENUE  
MIAMI, FL 33131 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name IGLESIAS, JULIO  
Address 901 SURFSIDE BOULE  
City-State-Zip: NORTH MIAMI FL 33181

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JULIO IGLESIAS

**PRESIDENT**

**01/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date