

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050515

FILED
Feb 13, 2007
Secretary of State

Entity Name: MASTER CONCESSIONAIR, LLC

Current Principal Place of Business:

1395 BRICKELL AVENUE
14TH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

MIAMI INTERNATIONAL AIRPORT
CONCOURSE E SATELLITE, 4TH LEVEL
MIAMI, FL 33122

Current Mailing Address:

1395 BRICKELL AVENUE
14TH FLOOR-FKL
MIAMI, FL 33131

New Mailing Address:

PO BOX 997180
MIAMI, FL 33299

FEI Number: 01-0836427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LICKSTEIN, FRED K ESQ
1395 BRICKELL AVE, 14TH FLOOR
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/MANAGERS:

Title: MGR () Delete
Name: ALBERNI, JOSE G
Address: PO BOX 997180
City-St-Zip: MIAMI, FL 33299

Title: MGR () Delete
Name: CARBAJAL, JORGE
Address: PO BOX 997180
City-St-Zip: MIAMI, FL 33299

Title: MGR () Delete
Name: AMARO, PEDRO JR
Address: PO BOX 997180
City-St-Zip: MIAMI, FL 33299

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: JOSE G ALBERNI

MGR

02/13/2007

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