

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 MAR 31 PM 4: 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L94000000674

AMAIR HOLDINGS, L.C.
106 AMBIENT AIR WAY
STARKE FL 32091

1a. Principal Place of Business Address

106 AMBIENT AIR WAY
STARKE FL 32091

2. Principal Place of Business
2a. Mailing Address

Suite, Apt. #, etc.
Suite, Apt. #, etc.

City & State
City & State

Zip Country
Zip Country

3. Date Organized or Qualified
12/08/1994
3a. State of Formation
FL
4. FEI Number
59-3286666
 Applied For
 Not Applicable
5. Date of Last Report
03/24/1997
6. Certificate of Status Desired
 \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

SHOLTES, DAVID C
106 AMBIENT AIR WAY
STARKE FL 32091

8. Name and Address of New Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
Zip Code
FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	SHOLTES, DAVID C	106 AMBIENT AIR WAY	STARKE FL
MGRM	COOKSEY, JOSEPH L JR	106 AMBIENT AIR WAY	STARKE FL

800002481758--9
-04/07/98--01089--019
****188.75 ****188.75
4-6

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Joseph L Cooksey Jr Joseph L Cooksey Jr 3/20/98 904 964 8440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #