

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000584

Entity Name: CARIBBEAN AVIATION, L.C.

FILED
Sep 14, 2006
Secretary of State

Current Principal Place of Business:

2635 W 81 STREET
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2635 W 81 STREET
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 65-0832769 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:

STONEY, STAFFORD
3740 S.W. 47 AVE
HOLLYWOOD, FL 330235557 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: MGRM () Delete
Name: STAFFORD, STONEY
Address: 3740 SW 42 AVE
City-St-Zip: HOLLYWOOD, FL 33023

Title: MGRM () Delete
Name: DE LA SIERRA, RAUL
Address: 2637 W 81 ST
City-St-Zip: HIALEAH, FL 33016

Title: MGRM () Delete
Name: DIAZ, JUAN C
Address: 19304 WEST LAKE DRIVE
City-St-Zip: MIAMI, FL 33015

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: RAUL DE LA SIERRA

MNGM

09/14/2006

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