

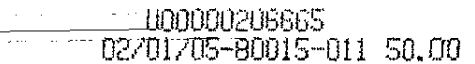
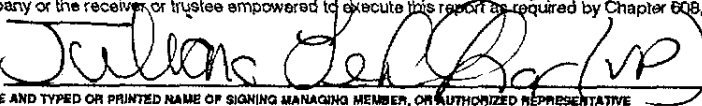


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000012011		
1. Entity Name FEHLHABER CHARTERS LLC		
Principal Place of Business % ROBERT FEHLHABER 2020 W. MCNAB ROAD FT. LAUDERDALE, FL 33309	Mailing Address % ROBERT FEHLHABER 2020 W. MCNAB ROAD FT. LAUDERDALE, FL 33309	 01042005No Ghg-LLC CR2E083 (10/03) 4. FEI Number 65-1044235 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required Applied For Not Applicable
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HAFT, STUART J ESQ. 321 ROYAL POINCIANA PLAZA PALM BEACH, FL 33480		
DO NOT WRITE IN THIS SPACE		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FEHLHABER CORPORATION 2020 W. MCNAB ROAD FT. LAUDERDALE, FL 33309	 02/01/05-80015-011 50.00 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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)(i), 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date: 1/27/05 Daytime Phone #