

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012669

Entity Name: AEROSPACE SERVICE, L.L.C.

FILED  
Jan 09, 2007  
Secretary of State

## Current Principal Place of Business:

258 S W 33RD ST  
FORT LAUDERDALE, FL 33315

## New Principal Place of Business:

## Current Mailing Address:

1721 S E NINTH ST  
FORT LAUDERDALE, FL 33316

## New Mailing Address:

FEI Number: 65-1051027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLLINS, TARI  
1721 S.E. NINTH ST  
FORT LAUDERDALE, FL 33316 US

## Name and Address of New Registered Agent:

COLLINS, EDWARD  
1721 S.E. NINTH ST  
FORT LAUDERDALE, FL 33316 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: EDWARD COLLINS

01/09/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: AEROSPACE SERVICE, I, NC.  
Address: 258 S.W. 33RD STREET  
City-St-Zip: FT. LAUDERDALE, FL 33315

Title: MGRM ( ) Delete  
Name: AEROSERVICE, INC.,  
Address: 3814 CURTISS PARKWAY  
City-St-Zip: VIRGINIA GARDENS, FL 33166

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: AEROSPACE SERVICE, I, NC  
Address: 258 S.W. 33RD STREET  
City-St-Zip: FT. LAUDERDALE, FL 33315

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: EDWARD COLLINS

MGRM

01/09/2007

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