2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002968

Current Principal Place of Business:

9304 BALADA STREET

Entity Name: A.H. CHARTER SERVICES, LLC

FILED May 01, 2007 Secretary of State

CORAL GA	ABLES, FL 33156	CORAL GABLES, FL 33156
Current M	ailing Address:	New Mailing Address:
	ADA STREET ABLES, FL 33156	9320 GALLARDO STREET CORAL GABLES, FL 33156
In accordance	65-1078311 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the limited liability co Address of Current Registered Agent:	ompany did not receive the prior notice.
	HELEN ADA STREET ABLES, FL 33156 US	MONZON, HELEN 9320 GALLARDO STREET CORAL GABLES, FL 33156 US
	named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or both
SIGNATURE:		05/01/2007
	Electronic Signature of Registered Ag	gent Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:
Title: Name: Address:	MGRM () Delete MONZON, ANTONIO & HE, LEN 9304 BALADA STREET	Title: MGRM (X) Change () Addition Name: MONZON, ANTONIO & HE, LEN Address: 9320 GALLARDO STREET

City-St-Zip: CORAL GABLES, FL 33156 Title: MGRM () Delete MONZON, ANTHONY Name: 9304 BALADA STREET Address:

MGRM

CORAL GABLES, FL 33156

CORAL GABLES, FL 33156

MONZON, LAUREN

9304 BALADA STREET

() Delete

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MGRM Title: () Delete Name: OCARIZ, HIRAM

7450 S.W. 86TH CT. Address: City-St-Zip: MIAMI, FL 33143

Title: MGRM () Delete OCARIZ, GRISELL Name:

7450 S.W. 86TH CT. Address: MIAMI, FL 33143 City-St-Zip:

Address: 9320 GALLARDO STREET City-St-Zip: CORAL GABLES, FL 33156

New Principal Place of Business:

9320 GALLARDO STREET

(X) Change () Addition Title: MGRM Name: MONZON, LAUREN Address: 9320 GALLARDO STREET City-St-Zip: CORAL GABLES, FL 33156

Title: MGRM (X) Change () Addition Name: MONZON, ANTHONY 9320 GALLARDO STREET Address: City-St-Zip: CORAL GABLES, FL 33156

Title: () Change () Addition Name:

() Change () Addition

Title: Name: Address: City-St-Zip:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: HELEN MONZON **MGRM** 05/01/2007