

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000003035 1. Entity Name MILAM COMMERCE, LLC	
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Principal Place of Business
% V.H.L. AIRCRAFT INC.
5000 NW 74TH AVE.
MIAMI, FL 33166

Mailing Address
% V.H.L. AIRCRAFT INC.
5000 NW 74TH AVE.
MIAMI, FL 33166



04262004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1093134	Applied For Not Applicable
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5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.
2 SOUTH BISCAYNE BLVD.
SUITE 3400
MIAMI, FL 33131

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2004**

U00000139081
04/29/04-80106-028 50.00

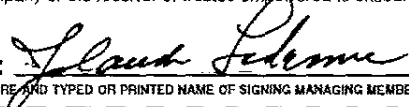
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P LEDESMA, MANUEL I 8955 SW 75 ST. MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPST LEDESMA, YOLANDA 8955 SW 75 ST. MIAMI, FL 33173
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

U00000139081
04/29/04-80106-029 5.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 60B, Florida Statutes.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04-26-04

Date

Daytime Phone #