

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020805

FILED  
Mar 29, 2005  
Secretary of State

Entity Name: GLOBAL FLIGHT SERVICES, LLC

## Current Principal Place of Business:

12240 NE 14TH AVENUE  
NORTH MIAMI, FL 33161

## New Principal Place of Business:

4600 ROYAL PALM AVENUE  
MIAMI BEACH, FL 33140 US

## Current Mailing Address:

12240 NE 14TH AVENUE  
NORTH MIAMI, FL 33161

## New Mailing Address:

4600 ROYAL PALM AVENUE  
MIAMI BEACH, FL 33140 US

FEI Number: 02-0535862

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEMSER, BENJAMIN L  
12240 NE 14TH AVENUE  
NORTH MIAMI, FL 33161 US

## Name and Address of New Registered Agent:

SHEFFMAN, TAMRA  
4600 ROYAL PALM AVENUE  
MIAMI BEACH, FL 33140 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: TAMRA SHEFFMAN

03/29/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: NEMSER, BENJAMIN  
Address: 12240 NE 14TH AVENUE  
City-St-Zip: NORTH MIAMI, FL 33161

Title: MGRM ( ) Delete  
Name: NEMSER, JOSHUA  
Address: 12240 NE 14TH AVENUE  
City-St-Zip: NORTH MIAMI, FL 33161

Title: MGRM ( ) Delete  
Name: SHEFFMAN, TAMRA  
Address: 4600 ROYAL PALM AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM ( ) Delete  
Name: BLASI, PATRICIA  
Address: 3800 NE 209TH TERRACE  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM ( ) Delete  
Name: BORTOLIN, SONIA  
Address: 2025 NE 164TH STREET #409  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM ( ) Delete  
Name: BOWMAN, DAVID  
Address: 9043 SW 65 TERR  
City-St-Zip: MIAMI, FL 33173

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: NEMSER, BENJAMIN  
Address: 12240 NE 14TH AVENUE  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 Section 119.07(3)(i), 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: TAMRA SHEFFMAN

MGRM

03/29/2005

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