


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000003221 1. Entity Name CORPORATE AIR SUPPORT, LLC	
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Principal Place of Business 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE, FL 33394	Mailing Address 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE, FL 33394
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03082006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 80-0049913	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent HARDIN, DAVID C 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE, FL 33394
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**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 _____
Signature, typed or printed name of registered agent and title if applicable.

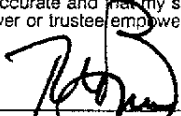
**Filing Fee is \$50.00
Due by May 1, 2006**

U00000543163
05/18/06-80126-023 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR
NAME	BAUR, THOMAS
STREET ADDRESS	5280 NW 21 AVE. HANGER 58
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309
TITLE	MGR
NAME	BAUR, CINDY
STREET ADDRESS	5280 NW 21 AVE. HANGER 58
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  4-26-06 954-772-4696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #