

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014769

FILED
Apr 17, 2006
Secretary of State

Entity Name: POWERSPARES AERO, LLC

Current Principal Place of Business:

ONE SOUTH OCEAN BLVD., STE. 324
BOCA RATON, FL 33432

New Principal Place of Business:

6601 LYONS ROAD
SUITE E-1
COCONUT CREEK, FL 33073

Current Mailing Address:

ONE SOUTH OCEAN BLVD., STE. 324
BOCA RATON, FL 33432

New Mailing Address:

6601 LYONS ROAD
SUITE E-1
COCONUT CREEK, FL 33073

FEI Number: 46-0487849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOTOS, MICHAEL E P.A.
C/O EDWARDS & ANGELL, LLP
ONE CLEMATIS STREET, STE 400
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AGARDY, BRUCE D
Address: ONE S OCEAN BLVD., STE 324
City-St-Zip: BOCA RATON, FL 33432

Title: MGR () Delete
Name: ELLIOTT, MICHAEL J
Address: ONE S OCEAN BLVD., STE 324
City-St-Zip: BOCA RATON, FL 33432

Title: MGR () Delete
Name: GREEN, LOUIS W IV
Address: ONE S OCEAN BLVD., STE 324
City-St-Zip: BOCA RATON, FL 33432

Title: MGR () Delete
Name: LASPINA, JAMES P
Address: ONE S OCEAN BLVD., STE 324
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AGARDY, BRUCE D
Address: 6601 LYONS ROAD, SUITE E-1
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGR (X) Change () Addition
Name: ELLIOTT, MICHAEL J
Address: 6601 LYONS ROAD, SUITE E-1
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGR (X) Change () Addition
Name: GREEN, LOUIS W IV
Address: 6601 LYONS ROAD, SUITE E-1
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGR (X) Change () Addition
Name: LASPINA, JAMES P
Address: 6601 LYONS ROAD, SUITE E-1
City-St-Zip: COCONUT CREEK, FL 33073

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: PAULA JACKSON

CFO

04/17/2006

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