2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016612

Entity Name: AERO TOY STORE, LLC

Name:

Address:

City-St-Zip:

1710 W CYPRESS CREEK ROAD

FORT LAUDERDALE, FL 33316

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1710 WEST CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 **Current Mailing Address: New Mailing Address:** C/O BRUCE GREEN 1313 S. ANDREWS AVENUE FORT LAUDERDALE, FL 33316 FEI Number: 01-0726614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREEN, BRUCE D 1313 SOUTH ANDREWS AVENUE FORT LAUDERDALE, FL 33316 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MORRIS SHIRAZI, INC. Name: Name: 1710 WEST CYPRESS CREEK ROAD Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: CCA FINANCIAL SERVICES, INC. Name: Address: 1710 WEST CYPRESS CREEK ROAD Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition JOLINA AVIATION USA INC. Name: Name: 1710 WEST CYPRESS CREEK ROAD Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: Title: MGR () Delete Title: () Change () Addition LAGGAN, RICHARD

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD LAGGAN 04/14/2009