2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT- # L02000034049
1. Entity Name . *
AIRCRAFT HOLDINGS, LLC

Principal Place of Business 7315 HUDSON AVE, HUDSON, FL 34667 Mailing Address

7315 HUDSON AVE. HUDSON, FL 34667



DO NOT WRITE IN THIS SPACE

01062004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 35-2191215 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ZSCHAU, JULIUS J 2701 N. ROCKY POINT DR., STE. 930 TAMPA, FL 33607

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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 Fiorida.	I am familiar with	and accept
	the obligations of registered agent.		

SIGNATURE.

Signature, typed or printed name of registered agent and title If applicable

(NOTE Registered Agent signature required when reinstating)

CATT

Filing Fee is \$50.00 Due by May 1, 2004 U00000147845 05/03/64-80124-010 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BONATI, ALFRED O 7315 HUDSON AVE. HUDSON, FL 34667
TITLE NAME STREET ADDRESS OFFY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY- ST-ZIP	
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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 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 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:

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

4/22/04 727-868-956

Daytime Phone