

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001693

Entity Name: ALTAIR, LLC

FILED  
Apr 20, 2008  
Secretary of State

**Current Principal Place of Business:**

5008 OLDE KERRY DR.  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

5008 OLDE KERRY DR.  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 03-0501469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DULZAIDES, ADRIAN N  
5008 OLDE KERRY DR.  
ORLANDO, FL 32837 US

**Name and Address of New Registered Agent:**

DULZAIDES, ORESTES E  
5008 OLDE KERRY DR.  
ORLANDO, FL 32837 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: ORESTES E. DULZAIDES

04/20/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DULZAIDES, ORESTES E  
Address: 5008 OLDE KERRY DR.  
City-St-Zip: ORLANDO, FL 32837

Title: MGRM ( ) Delete  
Name: DULZAIDES, MARGOT  
Address: 5008 OLDE KERRY DR.  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

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 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: ORESTES E. DULZAIDES

MGRM

04/20/2008

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