

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011983

Entity Name: CS AEROSPACE, L.L.C.

FILED  
Jan 25, 2006  
Secretary of State

**Current Principal Place of Business:**

6202 NW 115 PL., #326  
MIAMI, FL 33178

**New Principal Place of Business:**

11565 NW 71ST STREET  
MIAMI, FL 33178

**Current Mailing Address:**

P.O. BOX 668616  
MIAMI, FL 33166

**New Mailing Address:**

FEI Number: 58-2670637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SOLIS, CYNTHIA  
6202 NW 115 PL., #326  
MIAMI, FL 33178 US

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

SOLIS, CYNTHIA  
11565 NW 71ST STREET  
MIAMI, FL 33178 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:

01/25/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SOLIS, CYNTHIA  
Address: 6202 NW 115 PL., #326  
City-St-Zip: MIAMI, FL 33178

Title: MGR ( ) Delete  
Name: MARIO, GONGORA  
Address: 6202 NW 115 PL., #326  
City-St-Zip: MIAMI, FL 33178

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SOLIS, CYNTHIA  
Address: 11565 NW 71ST STREET  
City-St-Zip: MIAMI, FL 33178

Title: MGR (X) Change ( ) Addition  
Name: MARIO, GONGORA  
Address: 11565 NW 71ST STREET  
City-St-Zip: MIAMI, FL 33178

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: CYNTHIA SOLIS

MGR

01/25/2006

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