

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018589

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: GRUPO SKIES LATIN AMERICA, LLC

**Current Principal Place of Business:**

15801 N.W. 15TH AVENUE  
MIAMI, FL 33169

**New Principal Place of Business:**

2875 NE 191 STREET  
SUITE 800  
MIAMI, FL 33180

**Current Mailing Address:**

15801 N.W. 15TH AVENUE  
MIAMI, FL 33169

**New Mailing Address:**

2875 NE 191 STREET  
SUITE 800  
MIAMI, FL 33180

FEI Number: 20-0110854

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVENUE, SUITE 125  
CORAL GABLES, FL 33146 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: GILINSKI, ABRAHAM  
Address: 228 PARK DRIVE  
City-St-Zip: BAL HARBOUR, FL 33154

Title: MGR ( ) Delete  
Name: GILINSKI, MOISES  
Address: 287 BAL CROSS DRIVE  
City-St-Zip: BAL HARBOUR, FL 33154

Title: MGR ( ) Delete  
Name: IASLOVITS, MICHAEL  
Address: 168 CANDEM DRIVE  
City-St-Zip: BAL HARBOUR, FL 33154

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 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: MICHAEL IASLOVITS

MGR

04/30/2004

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