

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043892

Entity Name: OSIRIS AVIATION USA LLC

**FILED**  
**Jan 07, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

1799 NE 164TH ST SUITE 107  
N MIAMI, FL 33162

**New Principal Place of Business:**

12618 NW 14TH PLACE  
SUNRISE, FL 33323

**Current Mailing Address:**

1799 NE 164TH ST SUITE 107  
N MIAMI, FL 33162

**New Mailing Address:**

12618 NW 14TH PLACE  
SUNRISE, FL 33323

FEI Number: 20-0391515

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MARIN, NELLY  
1799 NE 164TH STREET  
105  
N MIAMI, FL 33162 US

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

BELLO, LUIS  
12618 NW 14TH PLACE  
SUNRISE, FL 33323 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: LUIS BELLO

01/07/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: MARIN, NELLY  
Address: 345 NW 135TH STREET  
City-St-Zip: MIAMI, FL 33168

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BELLO, LUIS  
Address: 12618 NW 14TH PLACE  
City-St-Zip: SUNRISE, FL 33323

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: LUIS BELLO

MNG

01/07/2005

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