

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006190

FILED  
Mar 27, 2007  
Secretary of State

Entity Name: BT AIRPORT SERVICES L.L.C.

**Current Principal Place of Business:**

6950 NW 77 CT  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 520687  
MIAMI, FL 33152

**New Mailing Address:**

FEI Number: 58-2683565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRAYSON, MOISES T  
25 SE 2ND AVE.  
SUITE 730  
MIAMI, FL 33131 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BIJOUX TERNER, INC.  
Address: 6950 NW 77 CT  
City-St-Zip: MIAMI, FL 33166

Title: MGR (X) Delete  
Name: THE ZEIGER CORPORATI, ON  
Address: 6950 NW 77 CT  
City-St-Zip: MIAMI, FL 33166

Title: MGR (X) Delete  
Name: JAKAL INVESTMENTS IN, C.  
Address: 2600 ISLAND BLVD. #2006  
City-St-Zip: AVENTURA, FL 33160

Title: MGR (X) Delete  
Name: PITIS INVESTMENTS IN, C  
Address: 2600 ISLAND BLVD. #2006  
City-St-Zip: AVENTURA, FL 33160

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BIJOUX TERNER, LLC,  
Address: 6950 NW 77 CT  
City-St-Zip: MIAMI, FL 33166

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 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: LEONOR SCHUCK

VP

03/27/2007

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