

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024695

Entity Name: AIR-PRO, LLC

FILED  
Mar 10, 2009  
Secretary of State

## Current Principal Place of Business:

6900 N.W. 52ND ST.  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

6900 N.W. 52ND ST.  
MIAMI, FL 33166

## New Mailing Address:

FEI Number: 20-0961491

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: QUEVEDO, BEN  
Address: 6900 N.W. 52ND ST.  
City-St-Zip: MIAMI, FL 33166

Title: MGRM ( ) Delete  
Name: CONESE, EUGENE  
Address: 6900 N.W. 52ND ST.  
City-St-Zip: MIAMI, FL 33166

Title: MGRM ( ) Delete  
Name: CASERTA, BEN  
Address: 6900 N.W. 52ND ST.  
City-St-Zip: MIAMI, FL 33166

Title: MGR ( ) Delete  
Name: BROADMEADOW, EDWARD T  
Address: 6900 N.W. 52ND ST.  
City-St-Zip: MIAMI, FL 33166

Title: MGR (X) Delete  
Name: OLESIK, MICHAEL  
Address: 6900 N.W. 52ND ST.  
City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition  
Name: OLESIK, MICHAEL  
Address: 6900 N.W. 52ND ST.  
City-St-Zip: MIAMI, FL 33166

Title: MGR (X) Change ( ) Addition  
Name: CASERTA, BEN  
Address: 6900 N.W. 52ND ST.  
City-St-Zip: MIAMI, FL 33166

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: BEN QUEVEDO

MGRM

03/10/2009

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