

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90195 042 ****50.00

DOCUMENT # L04000027892 1. Entity Name AERO INDUSTRIAL, LLC			
Principal Place of Business 1440 NOVA ROAD HOLLY HILL, FL 32117		Mailing Address 1440 NOVA ROAD HOLLY HILL, FL 32117	
2. Principal Place of Business Suite, Apt. #, etc. 1440 NOVA Rd #301 City & State Daytona Beach Zip Country		3. Mailing Address Suite, Apt. #, etc. 1440 NOVA Rd #301 City & State Daytona Beach Zip Country	
4. FEI Number 57-1203516		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		01132005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent BURNETT, RANDOM R 501 N. GRANDVIEW AVE., 3RD FLOOR EAST DAYTONA BEACH, FL 32118		7. Name and Address of New Registered Agent Name Richard K Martin Street Address (P.O. Box Number is Not Acceptable) 1440 NOVA Rd #301 City Daytona Beach FL Zip Code 32117	
8. 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; I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE 1/14/05 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to - Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN DAYTONA CORPORATION 1440 NOVA ROAD HOLLY HILL, FL 32117 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1440 NOVA Road #301 Daytona Beach, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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:		1/14/05 386-238-5577 <small>Date Daytime Phone #</small>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			