
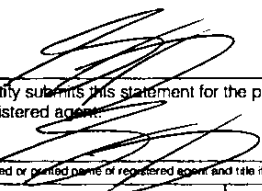
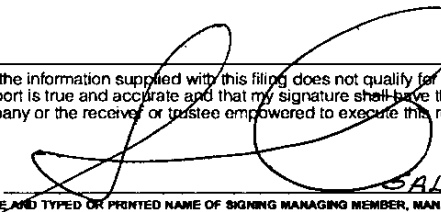


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90183 048 ****50.00

DOCUMENT # L04000030446 1. Entity Name AIR-X, LLC					
Principal Place of Business 5800 NORTHWEST 74TH AVENUE MIAMI, FL 33166			Mailing Address 5800 NORTHWEST 74TH AVENUE MIAMI, FL 33166		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		Country	
4. FEI Number 33-1094987					
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent DIAZ, JUAN ESQ 5800 NORTHWEST 74TH AVENUE MIAMI, FL 33166			7. Name and Address of New Registered Agent Name SALVADOR A. JURADO JR. ESQ. Street Address (P.O. Box Number is Not Acceptable) 6401 N.W. 74 AVE City MIAMI FL Zip Code 33166		
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 4/9/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BARED, JOSE P 5800 NORTHWEST 74TH AVENUE MIAMI, FL 331526642	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JURADO, SALVADOR A 6401 N.W. 74 AVE. MIAMI, FL 33166
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		<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 exemptions contained in Chapter 119, 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:  SALVADOR A. JURADO 4/9/07 (305) 592-8245 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					