2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035511

Entity Name: POWER AIR LLC

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1122 NE 176TH TERRACE 17101 NE 9TH AVE

NORTH MIAMI BEACH, FL 33162 NORTH MIAMI BEACH, FL 33162

Current Mailing Address: New Mailing Address:

1122 NE 176TH TERRACE 17101 NE 9TH AVE

NORTH MIAMI BEACH, FL 33162 NORTH MIAMI BEACH, FL 33162

FEI Number: 27-0090369 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LEN, BRUCE
1122 NE 176TH TERRACE
LEN, BRUCE
17101 NE 9TH AVE

NORTH MIAMI BEACH, FL 33162 US NORTH MIAMI BEACH, FL 33162 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: BRUCE LEN 03/19/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 LEN, BRUCE
 Name:
 LEN, BRUCE

 Address:
 1122 NE 176TH TERRACE
 Address:
 17101 NE 9TH AVE

City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 LEN, NATASHA
 Name:
 LEN, NATASHA

 Address:
 1122 NE 176TH TERRACE
 Address:
 17101 NE 9TH AVE

City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGR () Delete Title: () Change () Addition

 Name:
 GOLDSMITH, ELLIOT S
 Name:

 Address:
 901 NE 172 ST
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 GOLDSMITH, MERAV N
 Name:

 Address:
 901 NE 172 ST
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162
 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: BRUCE LEN MGR 03/19/2009