2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

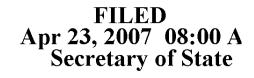
DOCUMENT # L04000045227

PROFESSIONAL AIR LEASING, LLC



Mailing Address

Principal Place of Business 10 N.W. 42ND AVENUE 10 N.W. 42ND AVENUE SUITE 700 **SUITE 700** MIAMI, FL 33126 MIAMI, FL 33126





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04172007 No Chg-LLC CR2E083 (11/05)

4. FEI Number	 Applied For
34-2001174	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MOURIZ, REINALDO J 10 N.W. 42ND AVENUE **SUITE 700** MIAMI, FL 33126

SIGNATURE:

SIGNATURE AND TYPED

DO NOT WRITE IN THIS SPACE

are obligations of registroid Egoric.			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent aignature required when reinstating)	DATE
F	iling Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	MOURIZ, REINALDO J		
STREET ADDRESS	10 NW 42ND AVE SUITE 700		
CITY-ST-ZIP	MIAMI, FL 33126		<u> </u>
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CITY-ST-ZIP			
11. I hereby indicated limited li	certify that the information supplied with this filing does not of on this report is true and appurate and that my signature stability company or the receptor or trustee empowered to execute the company or the receptor or trustee empowered to execute the company or the receptor or trustee empowered to execute the company or the receptor or trustee empowered to execute the company of the compan	qualify for the exemptions contained in Chapter 1 nall have the same legal effect as if made under cute this report as required by Chapter 608, Flor	 Florida Statutes. I further certify that the information oath; that I am a managing member or manager of the da Statutes.

RINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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