

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 22, 2008 8:00 am
Secretary of State

05-22-2008 90513 027 ***138.75

DOCUMENT # L04000048928



1. Entity Name
RICHMARK AIRCRAFT LEASING II, LLC

Principal Place of Business Mailing Address
1515 NORTH FEDERAL HIGHWAY, SUITE 306 1515 NORTH FEDERAL HIGHWAY, SUITE 306
BOCA RATON, FL 33432 BOCA RATON, FL 33432



02132008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 34-2002834	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MITCHELL B. KIRSCHNER, P. A.
1515 N. FEDERAL HWY, SUITE 314
BOCA RATON, FLORIDA 33432

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GENSHEIMER, MARK A. 1515 N. FEDERAL HIGHWAY, SUITE 306 BOCA RATON, FL 33421
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SESAME STREET PRODUCTIONS, INC. 399 NW 2ND AVENUE BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Mark A. Gensheimer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____

Mark A. Gensheimer
Managing Member