2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000059970

1. Entity Name
GH HELICOPTER BROKERS, LLC

Principal Place of Business

Mailing Address

ONE SOUTHEAST THIRD AVENUE

ONE SOUTHEAST THIRD AVENUE

3100 3 MIAMI, FL 33131 M

MIAMI, FL 33131

FILED May 01, 2007 8:00 am Secretary of State

05-01-2007 90316 001 ****50.00



02022007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1481094

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Mama	and A	ddroce	of Curro	nt Bogic	tored A	

ANGELO, BARRY & BANTA, P.A. 515 E. LAS OLAS BOULEVARD SUITE 850 FORT LAUDERDALE, FL 33301

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8. The above the obligat	named entity submits this statement for the purpose of changions of registered agent.	ging its registere	d office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
Filing Fee is \$50.00 Due by May 1, 2007								
9.	MANAGING MEMBERS/MANAGERS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TRACY, GRANVIL ONE SOUTHEAST THIRD AVENUE MIAMI, FL 33131							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NO	T WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SSPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS								

11. I hereby certify that the information supplied with this tiling 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 his 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/24/07 305-350-190/

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