

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084457

Entity Name: CS ICE 2, LLC.

FILED
Apr 13, 2007
Secretary of State

Current Principal Place of Business:

1100 LEE WAGONER BLVD
324
FT LAUDERDALE, FL 33315 US

Current Mailing Address:

1100 LEE WAGONER BLVD
324
FT LAUDERDALE, FL 33315 US

FEI Number: 20-1913732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C.S. AVIATION CONSULTANTS, INC.
1100 LEE WAGONER BLVD
324
FT LAUDERDALE, FL 33315 US

New Principal Place of Business:

1100 LEE WAGONER BLVD
324
FT LAUDERDALE, FL 33315 US

New Mailing Address:

1100 LEE WAGONER BLVD
324
FT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

C.S. AVIATION CONSULTANTS, INC.
1100 LEE WAGONER BLVD
324
FT LAUDERDALE, FL 33315 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: CARMEL SHASHUA

04/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: C.S. AVIATION CONSUL, TANTS, INC.
Address: 1100 LEE WAGONER BLVD STE 324
City-St-Zip: FT LAUDERDALE, FL 33315 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: C.S. AVIATION CONSUL, TANTS, INC.
Address: 1100 LEE WAGONER BLVD STE 324
City-St-Zip: FT LAUDERDALE, FL 33315 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CARMEL SHASHUA

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04/13/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date