2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

,	ANNUAL				
DOCUMENT # L05000065430 1. Entity Name				FILE	. U
HERNAN 	HERNANDEZ AIRPLANE, LLC			FILED 07 JUL 18 AM 10:21	
12510 KENE	Principal Place of Business Mailing Address 12510 KENDALL DRIVE 12510 KENDALL DRIVE MIAMI, FL 33186 MIAMI, FL 33186		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Milwin, FE 33100			••		TEORIDA
			CE	07022007 No Chg-LLC CR	2E083 (11/05)
D	O NOT WRITE	IN THIS SPA		4. FEI Number 65-0248238	Applied For Not Applicable
Name and Address of Current Registered Agent				5. Certificate of Status Desired	\$5.00 Additional Fee Required
BOHATCH, JOHN S 2600 DOUGLAS ROAD			DO NOT WRITE		
PENTHOUSE 8 CORAL GABLES, FL 33134			IN THIS SPACE		
8. The above named entire submiss 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 Signature topoed purefitted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$50.00 Due by September 14, 2007					
9.	MANAGING MEMBER	S/MANAGERS	-		
TITLE NAME	MGRM HERNANDEZ HOLDINGS, LLC				
STREET ADDRESS CITY-ST-ZIP	12510 KENDALL DRIVE MIAMI, FL 33186			07/19/070100301	<i>ለ</i> ቋቋለበበ በበ
TITLE			1	01) 13/010100201	7 ***YUU.UU
NAME Street address					
CITY-ST-ZIP			_		
TITLE NAME					
STREET ADDRESS CITY-ST-ZIP				DO NOT WRI	ΓΕ
TITLE		······································	-	IN THIS SPAC	E
NAME STREET ADDRESS					_
CITY-ST-ZIP TITLE					
NAME					
STREET ADDRESS CITY-ST-ZIP					
TITLE NAME	1)				
STREET ADDRESS CITY-ST-ZIP	TS 119/	\bigcap			
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 frue 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: 7/13/07					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Datio Despure Phone of					