2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# L06000005983

Entity Name: DUTY FREE AMERICAS ONBOARD, LLC

Current Principal Place of Business:

6100 HOLLYWOOD BLVD., 7TH FLOOR
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

6100 HOLLYWOOD BLVD., 7TH FLOOR
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TANEY, DAVID
6100 HOLLYWOOD BLVD., 7TH FLOOR
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	OWNE	( ) Delete
Name:	DUTY FREE AMERICAS,, INC.	
Address:	6100 HOLLYWOOD BLVD 7TH FLOOR	
City-St-Zip:	HOLLYWOOD, FL 33024	
Title:	COO	( ) Delete
Name:	FALIC, SIMON	
Address:	6100 HOLLYWOOD BLVD 7TH FLOOR	
City-St-Zip:	HOLLYWOOD, FL 33024 US	
Title:	CFO	( ) Delete
Name:	MCCLOSKEY, TIMOTHY	
Address:	6100 HOLLYWOOD BLVD	
City-St-Zip:	HOLLYWOOD, FL 33024 US	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY P MCCLOSKEY CFO 01/06/2009

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