2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L06000015170

Entity Name: SKYLINE AIR, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
C/O 7000 W. PALMETTO PARK ROAD SUITE 310 BOCA RATON, FL 33433 US	6740 SKYLINE DRIVE DELRAY BEACH, FL 33446 US

Current Mailing Address:	**New Mailing Address:**
C/O 7000 W. PALMETTO PARK ROAD SUITE 310 BOCA RATON, FL 33433 US	6740 SKYLINE DRIVE DELRAY BEACH, FL 33446 US

FEI Number: 20-8843792   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MORRIS, STUART R ESQ. 7000 W. PALMETTO PARK ROAD SUITE 310 BOCA RATON, FL 33433 US	PREISER, RICHARD 6740 SKYLINE DRIVE DELRAY BEACH, FL 33446 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: RICHARD PREISER   04/24/2007

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	( ) Delete	Title: MGR ( ) Change (X) Addition
Name:		Name: PREISER, RICHARD
Address:		Address: 6740 SKYLINE DRIVE
City-St-Zip:		City-St-Zip: DELRAY BEACH, FL 33446 US
Title:	( ) Delete	Title: MGR ( ) Change (X) Addition
Name:		Name: PREISER, PEGGY S
Address:		Address: 6740 SKYLINE DRIVE
City-St-Zip:		City-St-Zip: DELRAY BEACH, FL 33446 US

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: RICHARD PREISER   MGR   04/24/2007

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