

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000089333

1. Entity Name
L&C AIRCRAFT, LLC



Principal Place of Business
**14300 S.W. 129TH STREET, SUITE 106
MIAMI, FL 33186**

Mailing Address
**14300 S.W. 129TH STREET, SUITE 106
MIAMI, FL 33186**



01142008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5604195

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MENDOZA, LAZARO
14300 S.W. 129TH STREET, SUITE 106
MIAMI, FL 33186**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01/23/08 20-5604195 158.75

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MENDOZA, LAZARO
STREET ADDRESS	12730 S.W. 77 STREET
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	MGR
NAME	PEREIRA, CECILIO
STREET ADDRESS	15451 S.W. 138 TERRACE
CITY-ST-ZIP	MIAMI, FL 33196
TITLE	MGR
NAME	MENDOZA, BELKY'S
STREET ADDRESS	12730 SW 77 STREET
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

01/28/08 20-5604195 138.75

**DO NOT WRITE
IN THIS SPACE**

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 true 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:

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

Date

Daytime Phone #

1-15-07 325-254-9797