2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# L07000027952

Entity Name: AIRPORT WEST INDUSTRIAL II, L.L.C.

Current Principal Place of Business:

TWO ALHAMBRA PLAZA STE 860
CORAL GABLES, FL 33134

New Principal Place of Business:

2320 PONCE DE LEON BOULEVARD
SECOND FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

TWO ALHAMBRA PLAZA STE 860
CORAL GABLES, FL 33134

New Mailing Address:

2320 PONCE DE LEON BOULEVARD
SECOND FLOOR
CORAL GABLES, FL 33134

FEI Number: 20-8656842 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VILA, OSCAR J
TWO ALHAMBRA PLAZA STE 860
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

VILA, OSCAR J
2320 PONCE DE LEON BOULEVARD
SECOND FLOOR
CORAL GABLES, FL 33134 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: OSCAR J. VILA 01/09/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: VILA, OSCAR J
Address: TWO ALHAMBRA PLAZA STE 860
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete
Name: PADRON, CARLOS E
Address: TWO ALHAMBRA PLAZA STE 860
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: VILA, OSCAR J
Address: 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change ( ) Addition
Name: PADRON, CARLOS E
Address: 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

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: OSCAR J. VILA MGR 01/09/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date