

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063877

**FILED**  
**Apr 25, 2009**  
**Secretary of State**

**Entity Name:** ALFONSO AEROSPACE AND CONSULTING L.L.C.

**Current Principal Place of Business:**

30227 SW 158 PLACE  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

20871 SW 238TH STREET  
HOMESTEAD, FL 33031

**Current Mailing Address:**

30227 SW 158 PLACE  
HOMESTEAD, FL 33033

**New Mailing Address:**

20871 SW 238TH STREET  
HOMESTEAD, FL 33031

**FEI Number:** 90-0371351

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALFONSO, ROBERT  
30227 SW 158 PLACE  
HOMESTEAD, FL 33033 US

**Name and Address of New Registered Agent:**

ALFONSO, ROBERT  
20871 SW 238TH STREET  
HOMESTEAD, FL 33033 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: ROBERT ALFONSO

04/25/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ALFONSO, FRANCES  
Address: 30227 SW 158 PLACE  
City-St-Zip: HOMESTEAD, FL 33033

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ALFONSO, FRANCES  
Address: 20871 SW 238TH STREET  
City-St-Zip: HOMESTEAD, FL 33033

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: ROBERTR ALFONSO

PRES

04/25/2009

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