

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000080127

FILED
May 01, 2008
Secretary of State

Entity Name: SNJ AVIATION LLC

Current Principal Place of Business:

11560 S.W. 121ST AVENUE
MIAMI, FL 33186

New Principal Place of Business:

11560 S.W. 121ST AVENUE
MIAMI, FL 33186 US

Current Mailing Address:

11560 S.W. 121ST AVENUE
MIAMI, FL 33186

New Mailing Address:

11560 S.W. 121ST AVENUE
MIAMI, FL 33186 US

FEI Number: 22-3967190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

JOSEPH, SAMI
11560 S.W. 121ST AVENUE
MIAMI, FL 33186 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: MR. SAMI JOSEPH

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR. () Change (X) Addition
Name: JOSEPH, SAMI MEMBER
Address: 11560 S.W. 121 AVENUE
City-St-Zip: MIAMI, FL 33186 US

Title: MRS. () Change (X) Addition
Name: JOSEPH, NANCY MEMBER
Address: 11560 S.W. 121 AVENUE
City-St-Zip: MIAMI, FL 33186 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: SAMI JOSEPH

MR.

05/01/2008

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