

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000030136

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** APOLLO AVIATION ACQUISITIONS, LLC

**Current Principal Place of Business:**

848 BRICKELL AVENUE, SUITE 500  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

848 BRICKELL AVENUE, SUITE 500  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 26-2272950

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** HOFFMAN, WILLIAM  
**Address:** 848 BRICKELL AVENUE, SUITE 500  
**City-St-Zip:** MIAMI, FL 33131

**Title:** MGR  
**Name:** KORN, ROBERT  
**Address:** 848 BRICKELL AVENUE, SUITE 500  
**City-St-Zip:** MIAMI, FL 33131

I hereby 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:** WILLIAM HOFFMAN

MGR

04/26/2012

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