

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000059163

Entity Name: LEON AIR, LLC

FILED
Mar 03, 2009
Secretary of State

Current Principal Place of Business:

11501 SW 40 STREET
MIAMI, FL 33165

New Principal Place of Business:

11501 SW 40TH STREET
SECOND FLOOR
MIAMI, FL 33165

Current Mailing Address:

11501 SW 40 STREET
MIAMI, FL 33165

New Mailing Address:

11501 SW 40TH STREET
SECOND FLOOR
MIAMI, FL 33165

FEI Number: 26-2831490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JARVIS & ASSOCIATES, P.A.
283 CATALONIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

KOONDEL, MARK S
11501 SW 40TH STREET
SECOND FLOOR
MIAMI, FL 33165 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: MARK S KOONDEL

03/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEON, BENJAMIN JR.
Address: 11501 SW 40 ST
City-St-Zip: MIAMI, FL 33165

Title: MGRM () Delete
Name: LEON, SILVIA
Address: 11501 SW 40 ST
City-St-Zip: MIAMI, FL 33165

Title: MGRM () Delete
Name: MAURY, ALBERT
Address: 11501 SW 40 ST
City-St-Zip: MIAMI, FL 33165

Title: MGRM () Delete
Name: MAURY, SILVIA
Address: 11501 SW 40 ST
City-St-Zip: MIAMI, FL 33165

Title: MGRM () Delete
Name: LEON, LOURDES
Address: 11501 SW 40 ST
City-St-Zip: MIAMI, FL 33165

Title: MGRM () Delete
Name: LEON, BENJAMIN III
Address: 11501 SW 40 STREET
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BENJAMIN LEON JR

MGRM

03/03/2009

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