

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000056357

FILED
Jan 06, 2011
Secretary of State

Entity Name: PENTAGON AVIATION, LLC

Current Principal Place of Business:

1100 SOUTH FEDERAL HWY. #201
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

1100 SOUTH FEDERAL HWY. #201
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 30-0569840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1100 S. FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33441 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: ESTRADA SAAVEDRA, ENRIQUE LUIS
Address: 1100 SOUTH FEDERAL HWY. #1201
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR
Name: TUFRO, GUILLERMO
Address: 1100 SOUTH FEDERAL HWY. #1201
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR
Name: DE BARRIO, FELIX
Address: 1100 SOUTH FEDERAL HWY. #1201
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR
Name: FERNANDEZ, HECTOR
Address: 1100 SOUTH FEDERAL HWY. #1201
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR
Name: JAUREGUIBERRY, DIEGO
Address: 1100 SOUTH FEDERAL HWY. #1201
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR
Name: CANDIA, MIGUEL
Address: 1100 SOUTH FEDERAL HWY. #1201
City-St-Zip: DEERFIELD BEACH, FL 33441

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: FELIZ DE BARRIO

MGR

01/06/2011

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