2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 06, 2011
Secretary of State

DOCUMENT# L09000074048

Entity Name: LASIKAIR, LLC

Current Principal Place of Business:

4262 ULSTER AVE
NORTH PORT, FL 34287 US

New Principal Place of Business:

Current Mailing Address:

4262 ULSTER AVE
NORTH PORT, FL 34287 US

New Mailing Address:

FEI Number: 27-1930349 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LASIK, JAMES
4262 ULSTER AVE
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

LASIK, JAMES F
4262 ULSTER AVE
NORTH PORT, FL 34287 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: JAMES F. LASIK 02/06/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LASIK, JAMES F
Address: 4262 ULSTER AVE
City-St-Zip: NORTH PORT, FL 34287 US

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 Statues.

SIGNATURE: JAMES F. LASIK MBR 02/06/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date