

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED

Jan 26, 2005 08:00 AM
Secretary of State

DOCUMENT # L99000000282

1. Entity Name
PRIME AIR PARTS, L.L.C.



Principal Place of Business
2275 N.E. 164TH ST.
NORTH MIAMI BEACH FL 33160

Mailing Address
6264 OAKTON ST.
MORTON GROVE IL 60053

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



1st MOORE CR2E083 (10/04)

4. FEI Number 65-0889735
Applied For Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
NAPLES-LAWDOCK, INC.
1395 PANTHER LANE
SUITE 300
NAPLES FL 34109

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COHEN, BARRY 2275 N.E. 164TH ST. NORTH MIAMI BEACH FL 33160 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WOODEY, STEVE 2275 N.E. 164TH ST. NORTH MIAMI BEACH FL 33160 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Barry M. Cohen 1-20-05 (847) 583-1300