2004 LIMITED LIABILITY COMPANY

FILED Apr 23, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # M0000002450 1. Entity Name

| EL PREMIER AIRPORT HOLDING | G |
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GS, LLC

Principal Place of Business

Mailing Address

2875 N.E. 191ST STREET, PENTHOUSE 1 AVENTURA, FL 33180

2875 N.E. 191ST STREET, PENTHOUSE 1 AVENTURA, FL 33180



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

03122004 No Chg-LLC CR2E083 (10/03)

| 4. FEI Number | | | | Applied For |
|----------------------------------|---|-------|---|---------------|
| 65-1099634 | | | | Not Applicabl |
| 5. Certificate of Status Desired | П | \$5.0 | 0 | Additional |

5. Certificate of Status Desired

Fee Required

| KLEIN, THEODORE J ESQ. 88 N.E. 168TH STREET | DO N | NOT WRITE |
|--|------|-----------|
| NORTH MIAMI BEACH, FL 33162 | IN T | HIS SPACE |

| The above named entity submits this statement for the purpose of cha the obligations of registered agent. | inging its registered office or registered agent, or bo | th, in the State of Florida. I am familian | with, and accept |
|---|--|--|------------------|
| SIGNATURE Signature, typed or printed name of registered agent and the if applicable. | (NOTE. Registered Agent signature required when reinstating) | | · |
| Filing Fee is \$50.00 Due by May 1, 2004 | | 04/23/04-80055-007 | ' 50.00 |

| 9. | MANAGING MEMBERS/MANAGERS | |
|--|---|---------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR SREDNI, ERWIN 2875 N.E. 191ST STREET, PENTHOUSE 1 AVENTURA, FL 33180 | |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DO NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-S1-ZIP | | IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |

11. I hereby certify that the information supplied with this filling 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 rue 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

| SIGNATURE: | 4-16-04 | 305-945-0405 |
|--|---------|-----------------|
| SCHATURE AND DIFFED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE | Date | Daylime Phone # |
| | | |