

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jun 06, 2008 8:00 am
Secretary of State**

05-02-2008 90024 009 ***138.75

DOCUMENT # M02000000231

**1. Entity Name
DELTA LIMA LEASING, LLC**



**Principal Place of Business
848 BRICKELL AVENUE
SUITE 1220
MIAMI, FL 33131 US**

**Mailing Address
848 BRICKELL AVENUE
SUITE 1220
MIAMI, FL 33131 US**

30008831



04162008 No Chg-LLC

CR2E083 (12/07)

**4. FEI Number
05-0556853**

**Applied For
Not Applicable**

5. Certificate of Status Desired

☐ **\$5.00 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MEINERS JR, LOUIS M
200 AVIATION DRIVE
SUITE 2
NAPLES, FL 34104**

**DO NOT WRITE
IN THIS SPACE**

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

[Signature]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**
**MGRM
IGLESIAS, JOSE
848 BRICKELL AVENUE SUITE 1220
MIAMI, FL 33131**

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**TITLE
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
CITY - ST - ZIP**

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

[Signature]