2006 LIMITED LIABILITY COMPANY

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Jan 23, 2006 08:00 AM Secretary of State **ANNUAL REPORT** DCUMENT # M03000000375 SA AIR GROUP AIRLINE INVENTORY MANAGEMENT. Mailing Address oat Place of Business ON. 44TH ST., STE. 700 410 N, 44TH ST., STE. 700 **DENIX, AZ 85008** PHOENIX, AZ 85008 01102006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 48-1292015 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CORPORATION SYSTEM OO SOUTH PINE ISLAND ROAD DO NOT WRITE ANTATION, FL 33324 IN THIS SPACE 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 ne obligations of registered agent. Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS MGRM MESA AIR GROUP, INC. ADDRESS 410 N 44TH ST, STE 700 U00000398455 PHOENIX, AZ 85008 01/30/06-80096-010 50.00 DDRESS ADDRESS DO NOT WRITE IN THIS SPACE ADDRESS TADORESS ADDRESS Thereby 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 flability company of the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.

Davilma Phone #