2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 26, 2005 8:00 am Secretary of State DOCUMENT # M03000002122 04-26-2005 90015 050 ****50 00 AMERIAIR LEASING, LLC Principal Place of Business Mailing Address 20047501 1150 N.W. 72ND AVE., PENTHOUSE 2 1150 N.W. 72ND AVE., PENTHOUSE 2 MIAMI, FL 33126 MIAMI, FL 33126 03112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0064396 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JARVIS & ASSOCIATES, P.A. DO NOT WRITE 1500 SAN REMO, STE 145 MIAMI, FL 33146 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE CORUM HOMES, LLC NAME STREET ADDRESS 1150 N.W. 72ND AVE., PENTHOUSE 2 MIAMI, FL 33126 CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PA D NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPORTENTATIVE

Daytime Phone &

FILED