

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005076

Entity Name: JET ADVANTAGE, LLC

FILED  
Apr 07, 2008  
Secretary of State

## Current Principal Place of Business:

401 EAST LAS OLAS BLVD.  
SUITE 1400  
FT. LAUDERDALE, FL 33301

## Current Mailing Address:

401 EAST LAS OLAS BLVD.  
SUITE 1400  
FT. LAUDERDALE, FL 33301

## New Principal Place of Business:

401 EAST LAS OLAS BLVD.  
SUITE 1720  
FT. LAUDERDALE, FL 33301

## New Mailing Address:

401 EAST LAS OLAS BLVD.  
SUITE 1720  
FT. LAUDERDALE, FL 33301

FEI Number: 11-3732786

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FLYNN, JOHN J  
2400 EAST LAS OLAS BLVD  
PMB 105  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

FLYNN, JOHN J  
401 EAST LAS OLAS BLVD  
SUITE 1720  
FORT LAUDERDALE, FL 33301 US

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.

SIGNATURE:

04/07/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FLYNN, JOHN J  
Address: 401 EAST OLAS BLVD. SUITE 1400  
City-St-Zip: FORT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: FLYNN, JOHN J  
Address: 401 EAST OLAS BLVD. SUITE 1720  
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOHN J FLYNN

MGR

04/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date