2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 29, 2007 08:00 AM **Secretary of State**

DOCUMENT # M05 1. Entity Name FIRST WAVE AVIATION, L.		
Principal Place of Business	Mailing Address	 =-
27 NE 94 STREET MIAMI SHORES, FL 33138	27 NE 94 STREET Miami Shores, FL 33138	
	The state of the s	



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01092007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1948320

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Priorie #

OJEDA, RICHARD

SIGNATURE:

DO NOT WRITE

MIAMI SHORES, FL 33138			IN THIS SPACE		
5. The above the obligation	named entify submits this statement for the purpose of char tions of registered agent.	nging its registered office or	registered agent, or both, in the State of Florida. I am familiar with, and acc	ept	
SIGNATURE.	Signature, typed or printed name of registered light and title if applicable.	(NOTE: Registered Agent signatur	ure required which reinstating) DATE	··-	
F	iling Fee is \$50.00 ue by May 1, 2007			• .	
9.	MANAGING MEMBERS/MANAGERS			.5 ;	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CLARK, EDWARD D JR 5440 S 101ST E AVE TULSA, OK 74146		<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			02/01/07-80004-004 55.00	* **	
TITLE NAME STREET ADDRESS CITY-SI-ZIP			DO NOT WRITE		
title Name Street address City-St-Zip	<u>.</u>		IN THIS SPACE		
NTLE NAME STREET ADORESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	en de la companya de La companya de la co		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
indicated	certify that the information supplied with this filing does not on this report is true and accurate and that my signature sibility company or the receiver or trustee empowered to exe	hall have the same legal effe	contained in Chapter 119, Florida Statutes. I further certify that the information feet as if made under oath; that I am a managing member or manager of the by Chapter 608. Florida Statutes	nc ne	

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