
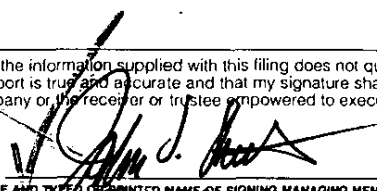


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jun 30, 2004 8:00 am**  
**Secretary of State**

06-30-2004 90025 008 \*\*\*\*55.00

DOCUMENT # L03000036207					
1. Entity Name PACESETTER LOGISTICS, LLC					
Principal Place of Business 6830 PORTO FINO CIRCLE FORT MYERS, FL 33912			Mailing Address 6830 PORTO FINO CIRCLE FORT MYERS, FL 33912		
2. Principal Place of Business 74 Buckhaven Hill		3. Mailing Address 74 Buckhaven Hill			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Upper Saddle River, NJ		City & State Upper Saddle River, NJ		06072004 Chg-LLC CR2E083 (10/03)	
Zip 07458		Country USA		4. FEI Number 30-0205599	
Applied For Not Applicable		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent SHIELDS, JOHN 6830 PORTO FINO CIRCLE FORT MYERS, FL 33912			7. Name and Address of New Registered Agent		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by September 8, 2004			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	MGRM	
STREET ADDRESS			STREET ADDRESS	Line of Sight Logistics, LLC	
CITY-ST-ZIP			CITY-ST-ZIP	6830 Porto Fino Fort Meyers, FL 33912	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	MGRM	
STREET ADDRESS			STREET ADDRESS	Coastwise Enterprises Corp.	
CITY-ST-ZIP			CITY-ST-ZIP	74 Buckhaven Hill Upper Saddle, NJ 07458	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: 			As of 3/31/04 239-565-2723		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE John Shields			By John Shields, Member of Line of Sight Logistics, LLC.		