LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE AND TYPED OF

FILED Aug 13, 2002 8:00 am Secretary of State

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DOCUMENT # L01000014883 1. Entity Name ANCHOR SHIPPING & LOGISTICS, L.L.C. DO NOT WRITE IN THIS SPACE 974103 2. Principal Place of Business 3. Mailing Address 2170 SE 17th Street 2170 SE 17th Street Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 302 Suite 302 City & State City & State 4. FE! Number Applied For Fort Lauderdael, FL Fort Lauderdale, FL 65-1136805 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired 33316 UŞA 33316 USA Fee Required 7. Name and Address of Current Registered Agent STEPHEN WILLIAMS DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 2170 SE 17th Street IN THIS SPACE Suite 302 <u>Fort Lauderdale</u> 8. The above named entity submits It for the pyrpose of changing its registered office or registered agent, or both, in the State of Florida. AUGUST B. 2002 SIGNATURE Signature, typed or pr d name of registered ac FEE IS \$50.00 Make Check Payable to Department of State **DUE BY MAY 1** MANAGING MEMBERS/MANAGERS 9. TITLE MGRM TITLE J. STEPHEN WILLIAMS NAME NAME 2170 SE 17th Street, Suite 302 STREET ADDRESS STREET ADDRESS Fort Lauderdale, FL CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREÉT ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME : STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZÍP 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 of trustee and operated to explute this report as required by Chapter 608, Florida Statutes.

HANGCER-

PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE