2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000014920

1. Entity Name
DSF TRANSPORT, LLC

Principal Place of Business	Mailing Address
701 TERN POINT CIRCLE BOCA RATON, FL 33431	701 TERN POINT CIRCLE BOCA RATON, FL 33431

01072004No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1151720
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____
(If changing registered agent, signature of new registered agent required) (If registered agent is a corporation, signature of corporate officer required) DATE

Filing Fee is $50.00
Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	FUENTE, DAVID
STREET ADDRESS	701 TERN POINT CIRCLE
CITY ST ZIP	BOCA RATON, FL 33431
TITLE	MGRM
NAME	FUENTE, SHEILA
STREET ADDRESS	701 TERN POINT CIRCLE
CITY ST ZIP	BOCA RATON, FL 33431
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
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CITY ST ZIP	

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01/23/04-80053-003 50.00

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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: D.I. Fuente DAVID I. FUENTE 1/18/04 561-417-3582
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE DAYTIME TELEPHONE NUMBER