2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 21, 2005 08:00 AM **DOCUMENT # L02000016613 Secretary of State** BEACON FREIGHT MANAGEMENT SERVICES, L.L.C. Principal Place of Business Mailing Address 5151 NW 17TH STREET 5151 NW 17TH STREET MARGATE, FL 33063 MARGATE, FL 33063 01102005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 55-0789661 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HEIDGERD, FREDERICK C DO NOT WRITE 600 W. HILLSBORO BLVD., SUITE 520 DEERFIELD BEACH, FL 33441 IN THIS SPACE 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. Signature, typed or printed name of registered agent and litle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE BLACK, MICHAEL STREET ADDRESS **6211 N2 65TH TERRACE** U00000189406 PARKLAND, FL 33067 CITY-ST-ZIP 01/24/05-80093-020 S0.100 IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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: SIGNATURE AND TYPER OR PRINTED NAME OF SIGNING MANAGING MEMBER; OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP