

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029105

Entity Name: B2 TRANSPORT, LLC

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

2800 GLADES CIRCLE
124
WESTON, FL 33327

New Principal Place of Business:

4720 OAKES ROAD
D
DAVIE, FL 33314

Current Mailing Address:

2800 GLADES CIRCLE
124
WESTON, FL 33327

New Mailing Address:

4720 OAKES ROAD
D
DAVIE, FL 33314

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARQUEZ, GABOR J
2269 NW 72ND TERRACE
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

MARQUEZ, GABOR J
2503 BAY ISLE DRIVE
WESTON, FL 33327 US

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.

SIGNATURE: GABOR J MARQUEZ

04/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: PIZZOLANTE, SERGIO D
Address: 2800 GALDES CIRCLE, SUITE 124
City-St-Zip: WESTON, FL 33327

Title: MGRM () Delete
Name: DABOIN, CARLOS E
Address: 2800 GLADES CIRCLE, SUITE 124
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PIZZOLANTE, SERGIO D
Address: 4720 OAKES ROAD
City-St-Zip: DAVIE, FL 33314

Title: MGRM (X) Change () Addition
Name: DABOIN, CARLOS E
Address: 4720 OAKES ROAD
City-St-Zip: DAVIE, FL 33314

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: CARLOS E DABOIN

MR

04/26/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date