

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086100

Entity Name: LINEHAUL XPRTS GROUP, LLC

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

633 SABAL LAKE DRIVE
SUITE 205
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

633 SABAL LAKE DRIVE
SUITE 205
LONGWOOD, FL 32779 US

New Mailing Address:

7392 NW 35TH TERRACE
SUITE 302
MIAMI, FL 33122 US

FEI Number: 20-3500155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA'S ENTERPRISE, INC.
5220 S. UNIVERSITY DRIVE
SUITE C-102
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

QUESADA, ROGER PRES
7392 NW 35TH TERRACE
SUITE 302
MIAMI, FL 33122 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: ROGER QUESADA

04/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR () Delete
Name: QUESADA, ROGER MEMBER
Address: 12950 NW 9TH LANE
City-St-Zip: MIAMI, FL 33182 US

Title: MR () Delete
Name: CHACON, JAVIER MEMBER
Address: 1792 SYCAMORE TERRACE
City-St-Zip: WESTON, FL 33327 US

ADDITIONS/CHANGES:

Title: MR (X) Change () Addition
Name: QUESADA, ROGER MEMBER
Address: 7392 NW 35TH TERRACE STE 302
City-St-Zip: MIAMI, FL 33122 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROGER QUESADA

PRES

04/24/2007

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