## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000015743

Address:

City-St-Zip:

6180 CYRIL DRIVE

DADE CITY, FL 33523 US

Entity Name: ANYWAY TRANSPORT LLC

FILED Apr 29, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6180 CYRIL DRIVE DADE CITY, FL 33523 US **Current Mailing Address: New Mailing Address:** 6180 CYRIL DRIVE DADE CITY, FL 33523 US FEI Number: 55-0917223 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COCCHI, TIFFANY 6180 CYRIL DRIVE DADE CITY, FL 33523 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition GRAFALS, ORLANDO Name: Name: Address: 6180 CYRIL DRIVE Address: City-St-Zip: DADE CITY, FL 33523 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: COCCHI, TIFFANY Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ORLANDO GRAFALS MGRN 04/29/2007