File on or before May 1, 1999 or Limited Liability Company will be **APEKUYEU** subject to a \$ 400.00 LATE FEE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY. **Katherine Harris** 00 JUN -7 AM 9: 34 ANNUAL REPORT Secretary of State DIVISION OF CORPGRATIONS 2000 SECRETARY OF STATE FILING FEE | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee T/A-0048853. FLORIDA Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # L95000000534** 1a. Principal Place of Business Address FORWARD LOGISTICS GROUP, L.C. 10651 SATELLITE BOULEVARD P.O. BOX 620543 ORLANDO FL 32862 ORLANDO FL 32862 3. Date Organized or Qualified 3a. State of Formation 2a. Mailing Address 2. Princinal Place of Business FL1500 Tradeport Dr. 07/10/1995 Suite, Apt. #, etc. 4. FEI Number Applied For -59-3331667 City & State Not Applicable 6. Certificate of Status Desired 5. Date of Last Report Country SB.75 Additional Fee Required 07/02/1998 Orang<u>e</u> 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent Name JORDAN, JOHN P Street Accress (P.O. Box Number is Not Acceptable) 10651 SATELLITE DOULEVERD 1500 Tradeport Dr. Orlando FL 32824 9. Pursuant to the provisions of Sections 608.416 and 608.508. Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorica. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE. (Registered Agent Accepting Appointment) (NOTE) Registered Faent's gnature required when reinstatings City, State and Zip Code Rusiness Street Address Managing Members/Managers 10. Title MELBOURNE INT. AIRPO 1 AIR CARGO PLACE, UNIT I GROPPE, ROBERT MGR 1500 Tradeport Dr. Orlando, FL 32824 JORDAN, JOHN MGR 11. Ido hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and according and traying 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 of the same legal effect as if made under oath; that I am a managing member or manager of the usted empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an limited liability company or the receiver attachment with an address. SIGNATURE: > YPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER INHSE 10 R (12-98)