

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

98 MAY -1 AM 9:13

<b>FILING FEE</b>	<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b>
<b>\$ 188.75</b>	<b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>

1. Name and Mailing Address of Limited Liability Company	<b>DOCUMENT #</b>	L9700000073
TRANSPORT MANAGEMENT GROUP HENDERSON, L.C. C/O CHARLES BURGESS 210 NORTH 32ND AVE. HOLLYWOOD FL 33021		

1a. Principal Place of Business Address	C/O CHARLES BURGESS 210 NORTH 32ND AVE. HOLLYWOOD FL 33021
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2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

3. Date Organized or Qualified	3a. State of Formation
01/17/1997	FL
4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired
	SB 75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent
GEIGER, ROBERT S 1428 BRICKELL AVE. 6TH FLOOR MIAMI FL 33131

8. Name and Address of New Registered Agent/Office		
Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, etc.		
City	FL	Zip Code

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 Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	BURGESS, CHARLES J	210 N. 32ND AVE.	HOLLYWOOD FL 33021
MGR	BURGESS, PAMELA F.	210 N. 32ND AVE.	HOLLYWOOD FL 33021

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 \*\*\*\*188.75 \*\*\*\*188.75

11. I do 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 annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Pamela F. Burgess PAMELA F. BURGESS 3-4-98 704-375-1796

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #