
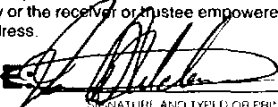


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR 29 PM 4:15

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000003062 COMPLETE FREIGHT SERVICES, L.C. C/O IAN T. BUTCHER 13615 S.W. 286 TERR. HOMESTEAD FL 33033		1a. Principal Place of Business Address C/O IAN T. BUTCHER 13615 S.W. 286 TERR. HOMESTEAD FL 33033	
2. Principal Place of Business 40 IAN T BUTCHER Suite, Apt. #, etc. 12224 SW 131AV City & State MIAMI, FLORIDA Zip 33186		2a. Mailing Address Suite, Apt. #, etc. City & State Zip USA	
		3. Date Organized or Qualified 12/01/1998	3a. State of Formation FL
		4. FEI Number 65-0877228	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report DEC, 98	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$6.75 Additional Fee Required
7. Name and Address of Current Registered Agent BUTCHER, IAN T 13615 SW 286 TERR. HOMESTEAD FL 33033		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 MIAMI	
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 _____		DATE _____	
<small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent's signature required when reinstating)</small>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	BUTCHER, IAN T	13615 S.W. 286 TERR. 12224 SW 131 AV	HOMESTEAD FL MIAMI, 900002866459--8 -05/07/99--01020--014 ****197.50 ****197.50
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 60B, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.			
SIGNATURE 		IAN T BUTCHER MGR. 1/27/99 3052523512 <small>Daytime Phone #</small>	