


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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	--

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 02 MAR - 9 11:10:24

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

1. Name and Mailing Address of Limited Liability Company DOCUMENT # M98000000128 PACIFIC TRAILER REPAIR SERVICES, LLC 1131 SW KLINKITAT WAY SEATTLE WA 98134

1a. Principal Place of Business Address 1131 SW KLINKITAT WAY SEATTLE WA 98134
--

2. Principal Place of Business 1131 SW Klinkitat Way Suite, Apt. #, etc. City & State Seattle, WA Zip 98134 Country USA	2a. Mailing Address 1131 SW Klinkitat Way Suite, Apt. #, etc. City & State Seattle, WA Zip 98134 Country USA
---	--

3. Date Organized or Qualified 02/11/1998	3a. State of Formation DE
4. FEI Number 22-3224826 APPLIED FOR	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

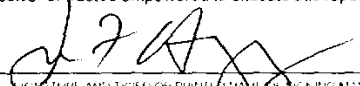
8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 700002800737--8 Suite, Apt. #, etc. 03/10/93--01060--003 ****188.75 ****188.75 City FL Zip Code

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 _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent's signature required when reappointing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	RAIL MANAGEMENT SERVIC	1131 SW KLINKITAT WAY	SEATTLE WA

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:  2/22/99 206-623-0304