


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	
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 # M98000001412 MEXICO EXPRESS OF NEVADA, L.L.C. 670 SAN FERNADO MISSION BLVD SAN FERNANDO CA 91340 <i>ag-ar LM</i>					
1a. Principal Place of Business Address 670 SAN FERNADO MISSION BLVD SAN FERNANDO CA 91340					
2. Principal Place of Business 2533 N. Carson St.		2a. Mailing Address 670 San Fernando Mission Blvd.		3. Date Organized or Qualified 11/18/1998	
Suite, Apt. #, etc. Suite 3486		Suite, Apt. #, etc.		3a. State of Formation NV	
City & State Carson City, NV		City & State San Fernando, CA		4. FEI Number 88-0386156 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip 89706		Country Carson		5. Date of Last Report	
		Zip 91340		Country Los Angeles	
7. Name and Address of Current Registered Agent NRAI SERVICES INC., 526 E. PARK AVENUE TALLAHASSEE FL 32301		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 300002837283--4 Suite, Apt. #, etc. -04/13/99-01003-019 City FL Zip Code ****188.75 ****188.75			
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 signature required when not original)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	PAPPAS, CHRISTINA	670 SANFERNANDO MISSION BL		SAN FERNANDO CA	
MGR	DELA VINA, GUILLERMO	670 SANFERNANDO MISSION BL		SAN FERNANDO CA	
MGR	DELA VINA, ALFREDO	670 SANFERNANDO MISSION BL		SAN FERNANDO CA	
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: <i>Christina M. Pappas</i> Christina M. Pappas 3/15/99 (818) 837-5939					