2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011624

Entity Name: LCM FREIGHT BROKERS, INC.

FILED Apr 24, 2009 Secretary of State

17395 NORTH BAY ROAD SUITE #108

SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

17395 NORTH BAY ROAD 251 174TH STREET

SUITE #108 SUITE #704

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

FEI Number: 26-2170302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEYBOVICH, LAZAR
17395 NORTH BAY ROAD
LEYBOVICH, LAZAR
251 174TH STREET

SUITE #108 SUITE #704

SUNNY ISLES BEACH, FL 33160 US SUNNY ISLES BEACH, FL 33160 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: GIDALI, CHAIM Name: LEYBOVICH, LAZAR

 Address:
 17395 NORTH BAY ROAD, SUITE #108
 Address:
 251 174TH STREET SUITE #704

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:
 SUNNY ISLES, FL 33160

Title: VP, () Delete Title: VP (X) Change () Addition

Name: LEYBOVICH, DOBIE Name: LEYBOVICH, DOVIE

 Address:
 17395 NORTH BAY ROAD, SUITE #108
 Address:
 251 174TH STREET SUITE #704

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:
 SUNNY ISLES, FL 33160

Title: S (X) Delete Title: () Change () Addition

 Name:
 LEYBOVICH, LAZAR
 Name:

 Address:
 17395 NORTH BAY ROAD, SUITE #108
 Address:

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 AYNGORN, MAER
 Name:

 Address:
 17395 NORTH BAY ROAD, SUITE #108
 Address:

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOVIE LEYBOVICH VP 04/24/2009