

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P25179 (3)

1. Corporation Name  
DSL TRANSPORTATION SERVICES, INC.

Principal Place of Business  
5011 FIRESTONE PLACE  
SOUTH GATE CA 90280

Mailing Address  
5011 FIRESTONE PLACE  
SOUTH GATE CA 90280-3533



2. Principal Place of Business

2a. Mailing Address

21 Suite Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

3. Date Incorporated or Qualified  
07/13/1989

3a. Date of Last Report  
05/01/1996

4. FEI Number

95-3334057

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C/O REYES, FRANK  
9901 NW 106 STREET  
MEDLEY FL 33178

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME CLARKE, P.V., JR.  
STREET ADDRESS 5011 FIRESTONE PLACE  
CITY- ST- ZIP SOUTH GATE CA

DELETE

TITLE VD  
NAME GRANTHAM, COBB  
STREET ADDRESS 5011 FIRESTONE PLACE  
CITY- ST- ZIP SOUTH GATE CA

DELETE

TITLE SD  
NAME CLARKE, P.V., JR.  
STREET ADDRESS 5011 FIRESTONE PLACE  
CITY- ST- ZIP SOUTH GATE CA

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

DELETE

1.1 TITLE VD  
1.2 NAME GRANTHAM, COBB  
1.3 STREET ADDRESS 5011 FIRESTONE PLACE  
1.4 CITY- ST- ZIP SOUTH GATE - CA - 90280

Change Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

Change Addition

3.1 TITLE T  
3.2 NAME MANEVICH, MIKE  
3.3 STREET ADDRESS 5011 FIRESTONE PLACE  
3.4 CITY- ST- ZIP SOUTH GATE - CA - 90280

Change Addition

4.1 TITLE P  
4.2 NAME CHARLES MC GEE  
4.3 STREET ADDRESS 5011 FIRESTONE PLACE  
4.4 CITY- ST- ZIP SOUTH GATE - CA - 90280

Change Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

Change Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

Change Addition

14. 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 or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charles McGee, Pres.* 4-23-97 215-563-7761  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)