2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P25179 May 15, 2000 8:00 am Secretary of State DSL TRANSPORTATION SERVICES, INC. 05-15-2000 90216 006 ***150.00 Principal Place of Business Mailing Address 5011 FIRESTONE PLACE 5011 FIRESTONE PLACE SOUTH GATE CA 90280 SOUTH GATE CA 90280-3533 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 95-3334057 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired 1 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C/O REYES, FRANK Street Address (P.O. Box Number is Not Acceptable) 9901 NW 106 STREET MEDLEY FL 33178 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE CE₀ NAME GRANTHAM, PAUL C STREET ADDRESS STREET ADDRESS **5011 FIRESTONE PLACE** CITY-ST-ZIP CITY-ST-ZIP SOUTH GATE CA. ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME CRANDALL, DARSE É STREET ADDRESS STREET ADDRESS **5011 FIRESTONE PLACE** CITY-ST-ZIP CITY-ST-ZIP SOUTH GATE CA-[] Change TH Addition Delete TITLE TITLE Michael S. Yusko NAME NAME MAREVICH, MIKE. son Firestone Place STREET ADDRESS STREET ADDRESS 5011 FIRESTONE PLACE gete, CA. 90,280 CITY-ST-7IP CITY-ST-ZIP SOUTH GATE CA ☐ Addition ☐ Defete TITLE NAME MCGEE, CHARLES STREET ADDRESS STREET ADDRESS **5011 FIRESTONE PLACE** CITY-ST-ZIP CITY-ST-ZIP SOUTH GATE CA ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00

(323) 563-7761

Daytime Phone #