

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L15322

FILED
May 01, 2005
Secretary of State

Entity Name: LOGOS INTEGRATED SYSTEMS, INC.

Current Principal Place of Business:

3435 S.W. 3RD STREET
DEERFIELD BCH., FL 33442 US

New Principal Place of Business:

Current Mailing Address:

3435 SW 3RD STREET
DEERFIELD BEACH, FL 33442 US

New Mailing Address:

FEI Number: 65-0142909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, LEONZO E.
3435 SW 3RD ST.
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MILLER, LEONZO E.,
Address: 3435 SW 3RD ST.
City-St-Zip: DEERFIELD BEACH, FL

Title: DST () Delete
Name: CARR, MICHELLE S.,
Address: 738 DANVILLE CIRCLE
City-St-Zip: WEST MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LOGOS INTEGRATED SYS, TEMS
Address: 3435 SW 3RD ST.
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEONZO E. MILLER

DP

05/01/2005

Electronic Signature of Signing Officer or Director

Date