2008 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED Mar 21, 2008 08:00 A tate

ANNOAL REPORT										
DOCUMENT # P02000022700 1. Entity Name EFH LOGISTICS, INC.							Secr	etar	y of S	
Principal Plac	e of Business	Mailing Address			1					
7227 NW 29		7227 NW 29TH AVE.								
MIAMI, FL 33147		MIAMI, FL 33147								
					1 (4 1) (1 1)				(1881 N 1881	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address					15 61 6 6 7 5	784 HIII 98		
Suite, Apt	# 810	Suite, Apt #, etc.			i					
Guild. Paper W, Gid.				03112008	Chg-P	CR2E034	(12/06)			
City & State		City & State		4. FEI Numb	er		Ar	plied For		
					02-0556501 Not Applicable					
Zip Country		Zip Count		try	5. Certificate of Status Desired \$8.75 Addition Fee Required					
							Fe -		d	
	6. Name and Address of Current				7. Name and	Address of Nev	w Registered Ag	ent		
ACUNIA JECUC B				Name	Name					
ACUNA, JESUS R 7227 NW 29TH AVE.				Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL	== : : : : : = :					~~				
				City			FL	Zip Cod	е	
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8. The above named onlity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.										
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SIGNATURE										
	Signature typed or printed name or registered agent	and the happicable (NOTE	, mag-stere	O Agent signature recion et	- Wilders (German Lang)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fin Trust Fund Contribute				ncing \$5	.00 May Be led to Fees					
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO C	OFFICERS AND D	RECTOR	S IN 11	
TITLE	PSTD	☐ Delete TIT					Γ	□ Change	☐ Addition	
NAME	ACUNA, JESUS R	NAN		E	U0000086508 04/08/08-80032-003 150.00					
STREET ADDRESS	7227 NW 29TH AVE.			ET ADDRESS		U47 U8.	/UԾ-ԾՄՍՃՀ	-005	150.00	
CITY-ST-ZIP	MIAMI, FL 33147	AMI, FL 33147		-ST-ZIP						
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NAME			NAM	"						
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CITY-ST-ZIP			-		 		· · · · · · · · · · · · · · · · · · ·			
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NAME CIDET ADDRESS			NAM	ET ADDRESS						
STREET ADDRESS CITY-ST-ZIP				- ST- ZIP						
	Delete 11/1			- 			Change	Addition		
TITLE NAME	NA:						_	0000		
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP			CITY	-ST-ZIP						
TITLE	☐ Delete TITL		E		***		Change	Addition		
NAME	NAN							·		
STREET ADDRESS			STRE	ET ADDRESS						
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NAME			NAM							
STREET ADDRESS	_			ET ADDRESS						
			-ST-ZIP			· · · · · · · · · · · · · · · · · · ·				
12. I hereby	certify that the information supplied wit	n this filing does not qualify fo	r the exi	emptions contained	d in Chapter 11	9, Florida Statute	s. I further certify	that the in	nformation	

indicated on this report or supplemental report is true and acquired 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 10 or Block 11 if changed, or on an attachment with an address, with all others like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-08