

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000059700

**Entity Name:** CARE LOGISTICS, INC.

**Current Principal Place of Business:**

3001 N.E. 185TH STREET  
SUITE 239  
AVENTURA, FL 33130

**Current Mailing Address:**

3001 N.E. 185TH STREET  
SUITE 239  
AVENTURA, FL 33130

**FEI Number:** 46-2015743

**Certificate of Status Desired:** Yes

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

SHAPIRO, LAWRENCE JESQ.  
175 S.W. 7TH STREET  
1600  
MIAMI, FL 33130 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name GARBER, MARK  
Address 2685 HOMECREST AVENUE #4F  
City-State-Zip: BROOKLYN NY 11235

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARK GARBER

**VICE PRESIDENT**

**02/19/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date