2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 480690

Entity Name: R & M LOGISTICS CORP.

FILED Mar 13, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
16400 N.W. 2ND AVE. STE #202 MIAMI, FL 33169						
Current Mailing Address:			New Mailir	New Mailing Address:		
16400 N.W. STE. #202 MIAMI, FL						
FEI Number:	59-1676766	FEI Number Applied For ()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
OSHEROFF, MARC A 16400 N.W. 2ND AVE. #203 MIAMI, FL 33169 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 Election Campaign Financing Trust Fund Contribution ().						
OFFICERS	AND DIRI	ECTORS:	ADDITION	S/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		() Delete ROBERT S J, R 2ND AVE., SUITE #203 33169	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD OSHEROFF 16400 N.W. MIAMI, FL 3	2ND AVE., SUITE #203	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:		() Delete , MARCI 2ND AVE. #203 MI BEACH, FL 33169	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:		() Delete	Title: Name: Address: City-St-Zip:	OSHEROFF, N 16400 NW 2N		
Title: Name: Address: City-St-Zip:		() Delete	Title: Name: Address: City-St-Zip:	VP (MITCHELL, RO 16400 NW 2N MIAMI, FL 33	D AVE #203	
Title: Name: Address: City-St-Zip:		() Delete	Title: Name: Address: City-St-Zip:	VP (HUFFMAN, JE 16400 NW 2N MIAMI, FL 33	D AVE #203	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARCI OSHEROFF VP 03/13/2009