2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770777

FILED Feb 04, 2008 Secretary of State

Entity Name: LOG CABIN ENTERPRISES, INC.

Current Principal Place of Business: New Principal Place of Business: 9040 SUNSET DR MIAMI, FL 33173 **Current Mailing Address: New Mailing Address:** 9040 SUNSET DR MIAMI, FL 33173 FEI Number: 59-2398577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEECH, LESLIE W JR. 9040 SÚNSET DR MIAMI, FL 33173 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PCD (X) Change () Addition () Delete EDELSTEIN, BERNARD EDELSTEIN, BERNARD Name: Name: 1221 BISCAYNE DRIVE Address: 1221 BISCAYNE DRIVE Address: SURFSIDE, FL 33154 City-St-Zip: City-St-Zip: SURFSIDE, FL 33154 Title: () Delete Title: (X) Change () Addition NEILBURG, SHEILA Name: NEIBURG, SHEILA Name: Address: 1221 BISCAYA DRIVE Address: 1221 BISCAYA DRIVE City-St-Zip: SURFSIDE, FL 33154 City-St-Zip: SURFSIDE, FL 33154 Title: () Delete Title: () Change () Addition BERSHAD, STAN Name: Name: 100 S KANE CONCOURSE, SUITE 207 Address: Address: City-St-Zip: MIAMI BEACH, FL 33154 City-St-Zip: Title: () Delete Title: () Change () Addition WEINGER, STEVEN M Name: Name: 2650 SW 27TH AVE Address: Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: () Delete Title: () Change () Addition PUJOL, ROSE Name: Name: 3059 GRAND AVE STE 200 Address: Address: City-St-Zip: MIAMI, FL 331335161 City-St-Zip: Title: () Delete Title: () Change () Addition CROWTHER, CONNIE Name: Name: Address: 269 GIRALDA AVE STE 302 Address: CORAL GABLES, FL 331345002 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE W. LEECH, JR. PRES 02/04/2008