2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State
04-16-2001 90249 033 ***158.75

DOCUMENT # F00000003002

1. Entity Name
INTELOGISTICS CORP.

Principal Place of Business	Mailing Address
1995 EAST OAKLAND PARK BLVD., SUITE 210 FT. LAUDERDALE FL 33306	1995 EAST OAKLAND PARK BLVD., SUITE 210 FT. LAUDERDALE FL 33306

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8411 W. Oakland Pk. Blvd.	8411 W. Oakland Park Blvd.
Suite, Apt. #, etc.: Suite 300	Suite, Apt. #, etc.: Suite 300
City & State: Sunrise, Fla.	City & State: Sunrise Fla
Zip: 33351 Country: USA	Zip: 33351 Country: USA

4. FEI Number 65-0851351 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARLOWE, RONALD ESQ. 201 S. BISCAYNE BLVD., #880 MIAMI FL 33131	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CST SELF, MICHAEL 19151 SW 54 PLACE FT. LAUDERDALE FL 33332	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC SACKHELM, ANDY 1995 E. OAKLAND PARK BLVD., #210 FORT LAUDERDALE FL 33306	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sackheim, Andy	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CROUTHAMEL, JOHN 1995 E. OAKLAND PARK BLVD., #210 FORT LAUDERDALE FL 33306	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3/16/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #