

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000000556

FILED  
Oct 19, 2004  
Secretary of State

Entity Name: CARGO CONNECTION LOGISTICS CORP.

## Current Principal Place of Business:

600 BAYVIEW AVE  
INWOOD, NY 11096

## New Principal Place of Business:

8501 NW 17TH STREET  
SUITE 102  
MIAMI, FL 33122

## Current Mailing Address:

7185 NW 87TH AVE  
MIAMI, FL 33178

## New Mailing Address:

600 BAYVIEW AVE  
INWOOD, NY 11096

FEI Number: 11-3305868

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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 DIRECTORS:

Title: CP ( ) Delete  
Name: DOBRINSKY, JESSE  
Address: 11 MUIRFIELD RD  
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: DVP ( ) Delete  
Name: UDELL, JOHN L  
Address: 5 TANGLEWOOD ROAD  
City-St-Zip: FREEPORT, NY 11520

Title: DST ( ) Delete  
Name: GOODMAN, SCOTT  
Address: 1591 WARREN STREET  
City-St-Zip: EAST MEADOW, NY 11554

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT GOODMAN

SECR

10/19/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date