
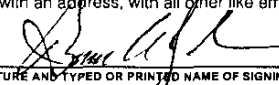


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2008 8:00 am
Secretary of State

05-23-2008 90158 001 *1,650.00

DOCUMENT # F03000002043					
1. Entity Name TRICONT LOGISTICS COMPANY					
Principal Place of Business 241 SEVILLA AVENUE CORAL GABLES, FL 33134			Mailing Address PO BOX 149222 ATTN: LEGAL DEPT. CORAL GABLES, FL 33114-9222		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 57-1162207	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D/P NAME EL-NAFFY, HANI STREET ADDRESS 241 SEVILLA AVENUE CITY-ST-ZIP CORAL GABLES, FL 33134	<input type="checkbox"/> Delete		TITLE SV/CFO NAME CONTRERAS, RICHARD STREET ADDRESS 241 Sevilla Avenue CITY-ST-ZIP Coral Gables, FL 33134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VCFO NAME INSERRA, JOHN F STREET ADDRESS 241 SEVILLA AVENUE CITY-ST-ZIP CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Delete		TITLE D/SV NAME Lazopoulos, Emanuel STREET ADDRESS 241 Sevilla Avenue CITY-ST-ZIP Coral Gables, FL 33134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE V/S NAME JORDAN, BRUCE A STREET ADDRESS 241 SEVILLA AVENUE CITY-ST-ZIP CORAL GABLES, FL 33134	<input type="checkbox"/> Delete		TITLE General Counsel NAME JORDAN, BRUCE A. STREET ADDRESS 241 Sevilla Avenue CITY-ST-ZIP Coral Gables, FL 33134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VAT NAME VICENTE, MONICA STREET ADDRESS 241 SEVILLA AVENUE CITY-ST-ZIP CORAL GABLES, FL 33134	<input type="checkbox"/> Delete		TITLE D/SV NAME Rice, Paul J. STREET ADDRESS 241 Sevilla Avenue CITY-ST-ZIP Coral Gables, FL 33134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VTAS NAME THOMPSON, PETER M STREET ADDRESS 241 SEVILLA AVENUE CITY-ST-ZIP CORAL GABLES, FL 33134	<input type="checkbox"/> Delete		TITLE V/AS NAME Tenazas, Marissa STREET ADDRESS 241 Sevilla Avenue CITY-ST-ZIP CORAL Gables, FL 33134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE V/AT NAME Contreras, RICHARD STREET ADDRESS 241 Sevilla Avenue CITY-ST-ZIP Coral Gables, FL 33134	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Bruce A. Jordan - Secretary 305/520-8400		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		