

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000001371 (1)
1. Corporation Name
SIG LOGISTICS, INC.



Principal Place of Business 1630 PRIME CT STE 100 ORLANDO FL 32809 US	Mailing Address 1630 PRIME CT STE 100 ORLANDO FL 32809 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country	3. Date Incorporated or Qualified 03/18/1996 4. FEI Number 36-4059083 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC GOTCH, YOSHIO D 925 W. THORNDALE AVE. ITASCA IL 60143	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	PD HIYA, YASUO 925 W. THORNDALE AVE. ITASCA IL 60143	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	1630 Prime Court Suite #100
CITY - ST - ZIP		2.4 CITY - ST - ZIP	Orlando FL 32809
TITLE	VSD NAKANISHI, HIROJI 925 W. THORNDALE AVE. ITASCA IL 60143	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	1630 Prime Court Suite #100
CITY - ST - ZIP		3.4 CITY - ST - ZIP	Orlando FL 32809
TITLE	V REYNOLDS, DONALD 925 W. THORNDALE AVE. ITASCA IL 60143	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	1630 Prime Court Suite #100
CITY - ST - ZIP		4.4 CITY - ST - ZIP	Orlando FL 32809
TITLE	D ISEKI, TADAO 925 W. THORNDALE AVE. ITASCA IL 60143	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	1630 Prime Court Suite #100
CITY - ST - ZIP		5.4 CITY - ST - ZIP	Orlando FL 32809
TITLE	D KOBAYASHI, YASUHIRO 925 W. THORNDALE AVE. ITASCA IL 60143	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	D Okada, Mitsuyoshi
STREET ADDRESS		6.3 STREET ADDRESS	1630 Prime Court Suite #100
CITY - ST - ZIP		6.4 CITY - ST - ZIP	Orlando FL 32809

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* HIROJI NAKANISHI 2/15/98 (409) 865-0990

CR2E034 (10/97)