2007 FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # K97893

1. Entity Name LOGGI ENTERPRISES, INC.



FILED Apr 12, 2007 08:00 A Secretary of State

Principal Place of Business

15553 SW 25 ST MIRAMAR, FL 33027 Mailing Address

15553 SW 25 ST

MIRAMAR, FL 33027 US



04052007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0143385

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

LODI, PAOLA 15553 SW 25 ST

DO NOT WRITE

MIRAMAR, FL 33027				IN THIS SPACE		
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						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT VP LODI, PIER 15553 SW 25TH MIRAMAR, FL 33027	CTORS			U00000702837 04/20/07-80117-002 158.75	
FITLE NAME STREET ADDRESS CITY-ST-ZIP	P LODI, PAOLA 15553 SW 25TH ST MIRAMAR, FL 33027					
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplies that the information and included on this report of supplies that the information and included on this report of supplies that the information and included on this report of supplies that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information in the information is a supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information is a supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information is a supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information is a supplied with this supplied with this supplied with this supplied with the s						

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 receive of 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 aedress, with all other like empowered.

SIGNATURE:

Daytime Phone #