2001	UNIFORM BUSI	NESS REPO	PRT	(UBR	S)	,				
DOCUM 1. Entity Name	MENT# 200000	934767		-	-					
Logical Economies ConsulTANTS						re. FILED				
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9429 FOUNTAINEBLEAU 9439 FOU # 30, MIAMI FC, 33172 MIAMI J 2. Principal Place of Business 3. Mailing Address					VAINEBLEAU SECONDARY					43
# 201)/ 	SECRETARY OF STATE TALLAHASSEE, FLORIBA				
MIAN	11 FC, 33172	MIAM	1 F	L 35	317	7		17100111	TEUM	wa.
2. Principal Pt	ace of Business	3. Mailing Address								
Sulte, Apt. (f, etc.	Suite, Apt. #, etc.				. DO NOT WRITE IN THIS SPACE				
City & State		City & State				4. FEI Number V Applied For Not Applied be				
Zφ	Country	Zip	Count	try		5. Certificate of	Status Desired		8.75 Add ee Required	
	6. Name and Address of Current F	legistered Agent		Name		7. Name and A	ddress of New Re	gistered Ac	ent	
OLIVERA ANTONIO P						s (P.O. Box Number is Not Acceptable)				
EZOO NW 10Th ST # 3						(P.O. BOX NO ROS	s not receptable)			
Unni Fh 33/36									, , , , , , , , , , , , , , , , , , ,	
147,		,,,,	•	Ö				FL	Zip Code	,
SIGNATURE _	named entity submits this statement for Manager and Manager and Signature, typed or private name of registered agent a	leverin	E Fegaline	d Agent signatu	e require	d when mindbeling)	,	OATE		
Tax filing re (See criteri	ration is eligible to satisfy its Intangible equirement and elects to do so. (a on back)					Trust	tion Campaign Fine Fund Contribution. HANGES TO OFFIC	. 0	Added	O May Be to Fees
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CTY-ST-ZP	pertification the information compliant with	this filing does not coality to	w the eve	-ST-ZIP motion stat	ed in S	Section 119 07(3)(1)	, Florida Statutes. I	further cert	By that the i	nformation
13. I hereby certify that the information supplied with this tiling 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 inustee 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 any address, with all other-like empowered.										
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF SIGNATU										

Logical Economics (bosellants Inc.

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I FURTHER STATE THAT I NEVER RECIEVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY,

PRESIDENT