FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

DOCUMENT # P00000072127 1. Entity Name Logistic Transit, Inc. DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 458 Lakeview 2605 NW 75th Avenue Suite, Apt. #, etc. Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Weston, Florida Miami, Florida 65-1027665 Not Applicable Country Country **US** 33326 \$8.75 Additional US 5. Certificate of Status Desired 33122 Fee Required 7. Name and Address of Current Registered Agent -Name-Sandoval, Jairo A DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 4069 Holly Court City Weston Zip Code 33331 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 Signature, typed or printed name of registered agent and rate it appearable (GOTF) Regrassed Agent signature required when revistating DATE 9. This corporation is eligible to satisfy its Intangible January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be Amended UBR is \$61,25 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE President CR2E034B (12/01) Jorge Arias NAME STREET ADDRESS 458 Lakeview Dr#4 STREET ADDRESS CHY-51-702 Weston FI 33326 CHY- \$1 - ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY- ST-ZIP IIILE NAME Maker STREET ADDRESS STREET ADDRESS DO NOT WRITE CitY+S1-ZiP CITY-ST-70P TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP TITLE NAM(STREET ADDRESS STREET ADDRESS City-St-Zie CITY-ST-ZIP THE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7# CHY-ST-782 supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further certify that the information pital report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an 13. Thereby certify that the informatic indicated on this report or support of the corporation or the recent attachment with an address, w

M 10/31/02

954-553 8597

Daytine Prons #

Logistic Transit Inc. 2605 NW 75th Avenue Miami, Fl 33122 305-640-0494 305-640-4557 Fax

Department of State;

The Department of State has our check in the amount of \$61.25

check#10597 for an amended UBR. This check was sent with an amended UBR, which did not have information about the registered agent, the Department of State sent back the amended UBR for correction and kept the check we sent for payment, enclosed find the corrected UBR, and if you have any questions please contact us at the above phone number.

Thanks

Carlos Cardenas General Manager