2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 06, 2002 8:00 am § Secretary of State **DOCUMENT #** P01000076295 1. Entity Name 05-06-2002 90282 006 ***150.00 LOGIFLEX IN-STOCK, INC. Principal Place of Business Mailing Address 1305 SW 8TH AVENUE 1305 SW 8TH AVENUE FORT LAUDERDALE FL 33315 FORT LAUDERDALE FL 33315 2. Principal Place of Business 3. Mailing Address 5553 ANGLENS 5553 AMOLERS Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. El Numbe Applied For FT. LANDERDALE 65-1126609 PT. LANDERBLE Not Applicable Country \$8.75 Additional 33312 5. Certificate of Status Desired 33312 Fee Required 6. Name and Address of Current Registered Agent *7-Name and Address of New Registered Agent GERMAN DIAZ, MARC H Street Address (P.O. Box Number is Not Acceptable) 1305 SW 8TH AVENUE FORT LAUDERDALE FL 33315 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE SECRETARY ☐ Delete TITLE CR2E034 (9/01) ☐ Change **X** Addition NAME MARC DIAZ GERMAN, ROBERT E NAME 2 01 NW STREET ADDRESS 1305 SW 8TH AVENUE 9868 STREET ADDRESS CITY-ST-7IP FORT LAUDERDALE FL 33315 CITY-ST-ZIP PLANTATION 33314 TITLE ☐ Defete ☐ Change ☐ Addition NAME MALTAIS, NORMAND NAME STREET ADDRESS 3635 RANGE 8 NORD-DEAUVILLE STREET ADDRESS CITY-ST-ZIP QUEBEC J1N3G1, CANADA CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information 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 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 11 or Block 12 if changed, or on an attroduced with an address with all other like empowered. with all other like empowered MARC DI SIGNATURE: SIGNATURE AND TYPES