

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000001306

Entity Name: XCC LOGISTICS, INC.

FILED
Jan 15, 2008
Secretary of State

Current Principal Place of Business:

6000 NW 97TH AVE
#400
MIAMI, FL 33178

New Principal Place of Business:

11200 NW 25 STREET
101
MIAMI, FL 33172

Current Mailing Address:

6000 NW 97TH AVE
#400
MIAMI, FL 33178

New Mailing Address:

11200 NW 25 STREET
101
MIAMI, FL 33172

FEI Number: 80-0025053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TYPALDOS, ARISTIDES
1701 N.W. 84 AVE.
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

GONZALEZ, WILLIAM
6560 NW 114 AV
528
MIAMI, FL 33178 US

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: WILLIAM GONZALEZ

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TYPALDOS, ARISTIDES
Address: 1701 NW 84 AVE.
City-St-Zip: MIAMI, FL 33126

Title: S () Delete
Name: HERNANDEZ, ANA MARIA
Address: 6000 NW 97 AVE., SUITE 400
City-St-Zip: DORAL, FL 33178

Title: V () Delete
Name: COCHEZ, RAUL
Address: 9744 NW 48TH TER
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARISTIDES TYPALDOS

PD

01/15/2008

Electronic Signature of Signing Officer or Director

Date