2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000012954

Entity Name: MAGIC LOGISTICS, INC.

FILED Oct 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4436 NW 74 AVE MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

4436 NW 74 AVE MIAMI, FL 33166

FEI Number: 02-0542641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 IINOL, MILTON E
 4436 NW 74 AVE.

 4436 NW 74 AVE.
 4436 NW 74 AVE.

 MIAMI, FL 33166
 US

FINOL, MILTON E
4436 NW 74 AVE.
MIAMI, FL 33166
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: FINOL MILTON 10/20/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BAZZICHELLI, FRANCESCA BAZZICHELLI, FRANCESCA Name: Name: 14205 SW 91ST STREET 7904 SW 64 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33143

Title: SVD () Delete Title: SVD (X) Change () Addition Name: RUIZ. FRANCISCO Name: RUIZ. FRANCISCO

 Name:
 RUIZ, FRANCISCO
 Name:
 RUIZ, FRANCISCO

 Address:
 14205 SW 91ST STREET
 Address:
 7904 SW 64 TERRACE

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33143

Title: D () Delete Title: D (X) Change () Addition

 Name:
 IINOL, MILTON E
 Name:
 FINOL, MILTON E

 Address:
 4436 NW 74 AVE.
 Address:
 4436 NW 74 AVE.

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FINOL MILTON D 10/20/2005