FILED

Jul 28, 2003 8:00 am

July 21, 2003 764-0616

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

SIGNATURE:

**Secretary of State** P02000057285 DOCUMENT # 03-10-2003 90101 006 \*\*\*150.00 1. Entity Name 07-28-2003 90134 002 \*\*\*400.00 MOTION LOGISTICS, INC. Principal Place of Business Mailing Address 6508 SW 20 CT 6508 SW 20 CT PLANTATION FL 33317 PLANTATION FL 33317 2. Principal Place of Business, 3301 S.E. 14 Adealu e 3. Mailing Address P.O. Box 165179 Suite, Apt. #, etc.
2 Nd FLOOT Port Everglades TH CHECK HERE IF MAKING CHANGES Applied For City & State -City & State 4. FEI Number derdale.FL 26-0067003 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired usa USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent · Ked Lhammer REDLHAMMER, ROBERT E Street Address (P.O. Box Number is Not Acceptable) 6508 SW 20TH CT. 10651 S.W. 27th ST. PLANTATION FL 33317 8. The above named atement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of SIGNATURE of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (4/03) Delete . TITLE Addition TITLE Redihammer, Albert J REDLHAMMER. ROBERT E NAME NAME 10651 S.W. 27 ST. STREET ADDRESS 6508 SW 20TH CT STREET ADDRESS DAULE, FL. 33328 CITY-ST-ZIP PLANTATION FL 33317 CITY-ST-7IP Delete Change Addition TITLE TITLE BATTETT, DANIEL W. NAME REDLHAMMER, CATHLEEN R 5704 SW 116 AVENLE STREET ADDRESS STREET ADDRESS 6508 SW 20TH CT CITY-ST-ZIP **PLANTATION FL 33317** CITY-ST-7IP Change Delete TITLE ☐ Addition PATRICIA L. BArrett NAME Ward, Gary P -5704 SW 116 AVENUE STREET ADDRESS STREET ADDRESS 164 SW 83RD WAY, #104 33330 CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33025 TITLE ☐ Delete TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 eport 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 freque emproyed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if