2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000094515

1. Entity Name I & G LOGISTICS INC.



FILED
Apr 11, 2006 08:00 AM
Secretary of State

Principal Place of Business

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DO NOT WRITE IN THIS SPACE

9835 SW 72 ST SUITE 207 MIAMI, FL 33173 Mailing Address 9835 SW 72 ST SUITE 207 MIAML FL 33173



03162006

No Chg-P

CR2E034 (11/05)

4. FEI Number 51-0423411

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALVAREZ, SYLVIA 15511 SW 152 LANE MIAMI, FL 33187

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The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in	n the State of Florida.	I am familiar with, and accept
the obligations of registered agent.	ĺ	
	1	

SIGNATURE

Signature, typed or printed name of registered agent and life if applicable.

(NOTE: Registated Agent argnature required when reinstaling)

DATE

FILE NOW!!! FEE 18 \$150.00 After May 1, 2006 Fee will be \$550.00 Etection Campaign Financing Trust Fund Centribution. \$5.00 May Be

U00000503227 04/26/06-80025-013 158.75

10.	OFFICERS AND DIRECTORS	٦
title Name Street address City-St-ZP	PD ROQUE, GEORGE 9835 SW 72 ST MIAMI, FL 33173	
TITLE NAME STREET ADDRESS CITY-ST-2P	DTS ROQUE, IDA 9835 SW 72 ST MIAMI, FL 33173	
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TITLE NAME STRIET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CATY-ST-ZEP		
TITLE NAME STRLET ADDRESS CITY-ST-ZIP		

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HIGH AT HE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

117/06

Dayrims Phone #