2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 30, 2004
Secretary of State

DOCUMENT# P03000018426

Entity Name: GUARANTEED LOGISTICS, INC.

Current Principal Place of Business:

566 NW 199TH TERRACE
NORTH MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

566 NW 199TH TERRACE
NORTH MIAMI, FL 33179

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAMS, SONJA
1250 NW 177TH TERRACE
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

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: _____

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:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS ( ) Change (X) Addition
Name: GIBSON, ANNETTE R PRES.
Address: 566 NE 199 TERRACE
City-St-Zip: MIAMI, FL 33179 US

Title: MR ( ) Change (X) Addition
Name: GIBSON, CHARLES A V.P.
Address: 566 NE 199 TERRACE
City-St-Zip: MIAMI, FL 33179

Title: MS ( ) Change (X) Addition
Name: WILLIAMS, SONJA OPR.MGR
Address: 1250 NW 177 TERRACE
City-St-Zip: MIAMI, FL 33169

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: SONJA WILLIAMS OPMR 11/30/2004

Electronic Signature of Signing Officer or Director — Date