


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 13, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000084471  
 1. Entity Name  
 J & E LOGISTICS, INC.



Principal Place of Business: 10622 NW 87TH CT. HIALEAH GARDENS, FL 33018  
 Mailing Address: 10622 NW 87TH CT. HIALEAH GARDENS, FL 33018

**DO NOT WRITE IN THIS SPACE**

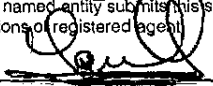


05062005 No Chg-P CR2E034 (10/03)

4. FEI Number: 75-3126099 Applied For: Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 FERNANDEZ, JESUS  
 10622 NW 87TH CT.  
 HIALEAH GARDENS, FL 33018

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE:  DATE: 5/6/05  
Signature, type or print name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

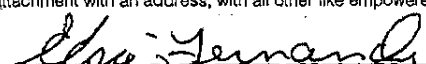
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FERNANDEZ, JESUS
STREET ADDRESS	10622 NW 87TH CT.
CITY - ST - ZIP	HIALEAH GARDENS, FL 33018.
TITLE	VD
NAME	FERNANDEZ, ELSIE
STREET ADDRESS	10622 NW 87TH CT.
CITY - ST - ZIP	HIALEAH GARDENS, FL 33018
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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119.07(3)(f) 05/13/05-80012-008 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  DATE: 5/6/05 305-819-4409  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

305-335-641