

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Amended

05 JUL 13 PM 4:22

STATE
FLORIDA

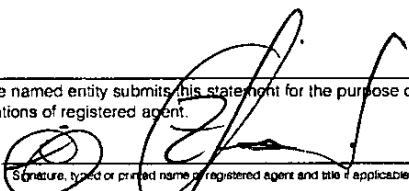
DOCUMENT # P04000008337		
1. Entity Name HURRICANE LOGISTICS INC.		

Principal Place of Business 9360 SW 38 ST MIAMI, FL 33155 US	Mailing Address 9360 SW 38 ST MIAMI, FL 33155 US
--	--

2. Principal Place of Business 6252 S.W. 25 ST Suite, Apt. #, etc.	3. Mailing Address 6252 S.W. 25 ST Suite, Apt. #, etc.
--	--

City & State Miami FL	City & State Miami FL
Zip 33155 U.S.A.	Zip 33155 U.S.A.

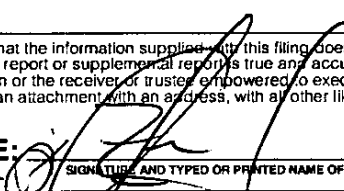
6. Name and Address of Current Registered Agent ROCA, MARYSOL 9360 SW 38 ST MIAMI, FL 33155		7. Name and Address of New Registered Agent Name Zenobio Armenteros Street Address (P.O. Box Number is Not Acceptable) 6252 S.W. 25 ST City Miami FL Zip Code 33155	
--	--	---	--

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 6/7/05

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
-----------------------	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES ROCA, MARYSOL 9360 SW 38 ST MIAMI, FL 33155 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Zenobio Armenteros 6252 S.W. 25 ST Miami, FL 33155 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PIZ, JOE 8260 WEST 18TH LANE HIALEAH, FL 33014 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700056267117 06/16/05--01060--013 **\$61.25 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 reports 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 another like empowered.

SIGNATURE: 	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Zenobio Armenteros
--	--

6/7/05 305.300.1296

15