

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 05, 2005  
Secretary of State**

DOCUMENT# P04000159043

Entity Name: LOGISTICAL ENGINEERING INC.

**Current Principal Place of Business:**

950 S. PINE ISLAND ROAD  
SUITE 1050  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

950 S. PINE ISLAND ROAD  
SUITE 1050  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 11-3733911      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAROTTA, JOSEPH  
950 S. PINE ISLAND ROAD  
SUITE 1050  
PLANTATION, FL 33324 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: JOSEPH MAROTTA

\_\_\_\_\_  
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: PD ( ) Delete  
Name: MAROTTA, JOSEPH  
Address: 950 S. PINE ISLAND ROAD, SUITE 1050  
City-St-Zip: PLANTATION, FL 33324

Title: VD ( ) Delete  
Name: HERNANDEZ, LYDIA  
Address: 950 S. PINE ISLAND ROAD, SUITE 1050  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSEPH MAROTTA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

10/05/2005

\_\_\_\_\_  
Date