2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000159043

Entity Name: LOGISTICAL ENGINEERING INC.

FILED Mar 28, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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950 S. PINE ISLAND ROAD 151 N NOB HILL RD.

SUITE 1050 SUITE 110

PLANTATION, FL 33324 PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

950 S. PINE ISLAND ROAD 151 N NOB HILL RD.

SUITE 1050 SUITE 110

PLANTATION, FL 33324 PLANTATION, FL 33324

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

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

MAROTTA, JOSEPH
950 S. PINE ISLAND ROAD
51 UTE 1050
SUITE 1050

SUITE 1050 SUITE 110
PLANTATION, FL 33324 US PLANTATION, FL 33324 US

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 03/28/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: MAROTTA, JOSEPH Name: MAROTTA, JOSEPH

 Address:
 950 S. PINE ISLAND ROAD, SUITE 1050
 Address:
 151 N NOB HILL RD., SUITE 110

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 PLANTATION, FL 33324

Title: VD () Delete Title: VD (X) Change () Addition

Name: HERNANDEZ, LYDIA Name: HERNANDEZ, LYDIA

 Address:
 950 S. PINE ISLAND ROAD, SUITE 1050
 Address:
 151 N NOB HILL RD., SUITE 110

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 PLANTATION, FL 33324

Title: () Delete Title: T () Change (X) Addition

Name: Name: SAMUELS, JASON

Address: Address: 151 N NOB HILL RD., SUITE 110 City-St-Zip: City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LYDIA HERNANDEZ VD 03/28/2007