2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031870

Entity Name: CENTRAL LOGICTICS INC.

FILED Mar 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 1700 MARTIN SUILLE COURT
 P.O. BOX 618081

 ORLANDO, FL 32825
 ORLANDO, FL 32861

Current Mailing Address: New Mailing Address:

 1700 MARTIN SUILLE COURT
 P.O. BOX 618081

 ORLANDO, FL 32825
 ORLANDO, FL 32861

FEI Number: 20-2445168 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SANCHEZ, JOSE M SANCHEZ, LEONIDES 1700 MARTIN SUILLE COURT 6136 RALEIGH ORLANDO, FL 32825 US ORLANDO, FL 32835 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: LEONIDES SANCHEZ

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P S
 () Delete

 Name:
 SANCHEZ, JOSE M

 Address:
 1700 MARTIN SUILLE COURT

City-St-Zip: ORLANDO, FL 32825

 Title:
 VP T
 () Delete

 Name:
 SANCHEZ, LEONIDES

 Address:
 1700 MARTIN SUILLE COURT

City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

03/21/2006

Title: PS (X) Change () Addition

 Name:
 MORALES, MERCEDES D

 Address:
 P.O. BOX 618081

 City-St-Zip:
 ORLANDO, FL 32861

Title: VP T (X) Change () Addition

Name: SANCHEZ, LEONIDES Address: P.O. BOX 618081 City-St-Zip: ORLANDO, FL 32861

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: LEONIDES SANCHEZ VPT 03/21/2006