2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000095316

1. Entity Name
LOGO HANGERS, INC.

Principal Place of Business	Mailing Address
11767 SOUTH DIXIE HIGHWAY SUITE 191 MIAMI, FL 33156	11767 SOUTH DIXIE HIGHWAY SUITE 191 MIAMI, FL 33156

FILED
Jan 11, 2008 08:00 A
Secretary of State

01092008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-3117608	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROBBINS, EDWARD
11767 SOUTH DIXIE HIGHWAY
SUITE 191
MIAMI, FL 33156

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_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000779557 01/11/08-80043-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	ROBBINS, EDWARD
STREET ADDRESS	11767 SOUTH DIXIE HIGHWAY SUITE 191
CITY-ST-ZIP	MIAMI, FL 33156

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _Edward Robbins_   Edward Robbins   1/09/08   305-259-9459

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #