

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140733

Entity Name: LOGI PLANNING CORP.

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

150 ALHAMBRA CIRCLE SUITE 1150  
CORAL GABLES, FL 33134

## New Principal Place of Business:

14707 S. DIXIE HWY  
403  
MIAMI, FL 33176

## Current Mailing Address:

14707 SOUTH DIXIE HIGHWAY PENTHOUSE 403  
MIAMI, FL 33176

## New Mailing Address:

14707 S. DIXIE HWY  
403  
MIAMI, FL 33176

FEI Number: 20-3820670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LITHMAN, ROBERT P  
150 ALHAMBRA CIRCLE SUITE 1150  
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LIMA, GUSTAVO R  
Address: 14707 SOUTH DIXIE HIGHWAY PENTHOUSE 403  
City-St-Zip: MIAMI, FL 33176

Title: VD ( ) Delete  
Name: GANZ, BRYAN  
Address: 80 TRAPELO RD  
City-St-Zip: LINCOLN, MA 01773

Title: VD ( ) Delete  
Name: SHERKIN, ROBERT  
Address: 95 CHILTERN HILL RD  
City-St-Zip: TORONTO, ON M6C 3C4 CA

Title: S ( ) Delete  
Name: O'TOOLE, MARY  
Address: 1332 OLD MARLBORO RD  
City-St-Zip: CONCORD, MA 01742

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LIMA, GUSTAVO R  
Address: 14707 SOUTH DIXIE HIGHWAY PH 403  
City-St-Zip: MIAMI, FL 33176

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

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 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: GUSTAVO R. LIMA

PD

01/08/2008

Electronic Signature of Signing Officer or Director

Date