

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020415

Entity Name: ENKA LOGISTICS, INC.

FILED  
Mar 09, 2007  
Secretary of State

## Current Principal Place of Business:

1290 WESTON ROAD  
SUITE 306-P4  
WESTON, FL 33326

## New Principal Place of Business:

4581 WESTON ROAD,  
# 137  
WESTON, FL 33331

## Current Mailing Address:

1290 WESTON ROAD  
SUITE 306-P4  
WESTON, FL 33326

## New Mailing Address:

4581 WESTON ROAD,  
# 137  
WESTON, FL 33331

FEI Number: 20-4301482

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GBS CONSULTANTS  
1290 WESTON ROAD  
SUITE 306  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

GBS CONSULTANTS  
18501 PINES BLVD.  
SUITE 201-S  
PEMBROKE PINES, FL 33029 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:

03/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DE LA TORRE, ALAIN  
Address: 7491 SW 10TH CT. #102  
City-St-Zip: NORTH LAUDERDALE, FL 33068

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ALAIN DE LA TORRE

PD

03/09/2007

Electronic Signature of Signing Officer or Director

Date