

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000092413

Entity Name: REAL LOGISTICS, INC.

FILED
Mar 13, 2008
Secretary of State

Current Principal Place of Business:

10450 NW 31 TERRACE
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

10450 NW 31 TERRACE
DORAL, FL 33172

New Mailing Address:

FEI Number: 20-5204389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE SOUZA, LUIZ C
10450 NW 31 TERRACE
DORAL, FL 33172 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DE SOUZA, LUIZ C
Address: 2315 NW 107TH AVENUE, UNIT 1M53/PM BOX 77
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: BORSETTI, SANDRA
Address: 2315 NW 107TH AVENUE, UNIT 1M53/PM BOX 77
City-St-Zip: MIAMI, FL 33172

Title: DM () Delete
Name: ALEXANDER, ELIZABETH
Address: 10450 NW 31 TERRACE
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: DE SOUZA, LUIZ C
Address: 10450 NW 31 TERRACE
City-St-Zip: DORAL, FL 33172

Title: D (X) Change () Addition
Name: BORSETTI, SANDRA
Address: 10450 NW 31 TERRACE
City-St-Zip: DORAL, FL 33172

Title: D (X) Change () Addition
Name: ALEXANDER, ELIZABETH
Address: 10450 NW 31 TERRACE
City-St-Zip: DORAL, FL 33172

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: LUIZ C DE SOUZA

Electronic Signature of Signing Officer or Director

PDS

03/13/2008

Date