

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000145297

FILED
Jan 18, 2008
Secretary of State

Entity Name: FIVE STARS INTEGRATED LOGISTICS INC

Current Principal Place of Business:

6405 NW 36 STREET SUITE 101
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

6405 NW 36 STREET SUITE 101
MIAMI, FL 33166

New Mailing Address:

FEI Number: 20-5933634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, LIBIA
7955 NW 12 STREET SUITE 400
MIAMI, FL 331663312 US

Name and Address of New Registered Agent:

JONES, LIBIA
6405 NW 36 STREET
SUITE 101
MIAMI, FL 33166 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:

01/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LIANO, JUAN P
Address: 6405 NW 36 STREET SUITE 101
City-St-Zip: MIAMI, FL 33166

Title: DVS () Delete
Name: JONES, LIBIA
Address: 6405 NW 36 STREET SUITE 101
City-St-Zip: MIAMI, FL 33166

Title: DT () Delete
Name: SACASA, MARTHA Y
Address: 6405 NW 36 STREET SUITE 101
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: JONES, LIBIA
Address: 6405 NW 36 STREET SUITE 101
City-St-Zip: MIAMI, FL 33166

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: LIBIA JONES

VP

01/18/2008

Electronic Signature of Signing Officer or Director

Date