2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# P07000033042

Entity Name: SKY SERVICE LOGISTIC, INC.

Current Principal Place of Business:

2500 NW 79 AVE.
SUITE 128
DORAL, FL 33122

New Principal Place of Business:

17558 SW 11TH ST
PEMBROKE PINES, FL 33029

Current Mailing Address:

2500 NW 79 AVE.
SUITE 128
DORAL, FL 33122

New Mailing Address:

17558 SW 11TH ST
PEMBROKE PINES, FL 33029

FEI Number: 20-8658060 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIVERA, PAOLA
2500 NW 79 AVE.
SUITE 128
DORAL, FL 33122 US

Name and Address of New Registered Agent:

CARCHI, FRANCISCO J S
17558 SW 11TH ST
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: JC 04/28/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RIVERA, PAOLA
Address: 2500 NW 79 AVE. SUITE 128
City-St-Zip: DORAL, FL 33122

Title: VD (X) Delete
Name: CARCHI, JOSE
Address: 2500 NW 79 AVE. SUITE 128
City-St-Zip: DORAL, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: CARCHIF, JOSE F
Address: 17558 SW 11TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

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: J.C VP 04/28/2009
Electronic Signature of Signing Officer or Director Date