

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P07000049057

**FILED**  
**Jun 24, 2011**  
**Secretary of State**

**Entity Name:** GOLDEN EAGLE LOGISTICS, INC.

**Current Principal Place of Business:**

5265 NW N DELWOOD DRIVE  
PORT ST LUCIE, FL 34986

**New Principal Place of Business:**

5027 SW ELK RIVER COURT  
PALM CITY, FL 34990

**Current Mailing Address:**

8400 ORANGE AVE.  
FT. PIERCE, FL 34945

**New Mailing Address:**

P.O. BOX 1871  
PALM CITY, FL 34991

**FEI Number:** 20-8905906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CIBENE, PATRICK  
1071 NE 45 STREET  
OAKLAND PARK, FL 33334 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: VP,D  
Name: LOPEZ, YONY  
Address: 5265 NW N DELWOOD DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: T  
Name: CIBENE, PATRICK  
Address: 1071 NE 45 STREET  
City-St-Zip: OAKLAND PARK, FL 33334

Title: P, D  
Name: DAVIS, JAMES N III  
Address: 5027 S.W. ELK RIVER COURT  
City-St-Zip: PALM CITY, FL 34990

I hereby 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 all other like empowered.

SIGNATURE: JAMES N DAVIS

PRES

06/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date