

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000119227

FILED
Apr 23, 2008
Secretary of State

Entity Name: ORTIZ LOGISTIC SERVICES, INC.

Current Principal Place of Business:

501 SOUTH STREET
FERN PARK, FL 32730

New Principal Place of Business:

Current Mailing Address:

501 SOUTH STREET
FERN PARK, FL 32730

New Mailing Address:

FEI Number: 26-1334763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, DANIEL
501 SOUTH STREET
FERN PARK, FL 32730 US

Name and Address of New Registered Agent:

ARIAS, JENNIFER
501 SOUTH STREET
FERN PARK, FL 32730 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: JENNIFER ARIAS

04/23/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPC () Delete
Name: ORTIZ, DANIEL
Address: 501 SOUTH STREET
City-St-Zip: FERN PARK, FL 32730

Title: D () Delete
Name: MOREL, ANTHONY
Address: 5000 CATSPAW CT.
City-St-Zip: ORLANDO, FL 32808

Title: S/D (X) Delete
Name: ORTIZ, AMANDA
Address: 501 SOUTH STREET
City-St-Zip: FERN PARK, FL 32730

Title: D (X) Delete
Name: CHRISTOPHER, LOPEZ
Address: 8109 PLANTATION DR.
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Delete
Name: ORTIZ, JOEL JR
Address: 501 SOUTH STREET
City-St-Zip: FERN PARK, FL 32730

Title: T/D (X) Delete
Name: ARIAS, JENNIFER
Address: 117 S. CORTEZ AVE,
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ORTIZ, SECUNDINA
Address: 501 SOUTH STREET
City-St-Zip: FERN PARK, FL 32730

Title: VP (X) Change () Addition
Name: ARIAS, JENNIFER
Address: 501 SOUTH STREET
City-St-Zip: FERN PARK, FL 32730

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

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

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

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: JENNIFER ARIAS

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date