

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000089263

**FILED**  
**Mar 06, 2011**  
**Secretary of State**

**Entity Name:** ANTILLEAN LOGISTICS CENTER, INC.

**Current Principal Place of Business:**

3038 NW NORTH RIVER DRIVE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

3038 NW NORTH RIVER DRIVE  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRADOS, MARY E CPA  
8740 NE 2ND AVE  
EL PORTAL, FL 33138 US

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

PATRICK E. NOVAK ESQ.  
9100 S. DADELNAD BOULEVARD  
ONE DATRAN CENTER, SUITE 1104  
MIAMI, FL 33156 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: PATRICK E. NOVAK ESQ.

03/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BABUN, SARA  
Address: 3038 NW NORTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33142

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: SARA C. BABUN

PSD

03/06/2011

Electronic Signature of Signing Officer or Director

Date