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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34632

1. Corporation Name

LOGISTICS SERVICES INCORPORATED

Principal Place of Business

1612 NORTHWEST 84TH AVE
MIAMI FL 33126-8032

Mailing Address

1612 NORTHWEST 84TH AVE
MIAMI FL 33126-8032

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PCD
SANTISTEVAN, EDUARDO
180 MAIDEN LANE
NEW YORK NY

[] DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD
ELINSON, ARTHUR
1612 N.W. 84TH AVENUE
MIAMI FL

[] DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S
RUSSELL, JAMES R. L.
180 MAIDEN LANE
NEW YORK NY

[] DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

T
O'GRADY, BRENDAN
180 MAIDEN LANE
NEW YORK NY

[] DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D
DELANNEY, SUSANA D.
180 MAIDEN LANE
NEW YORK NY

[] DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D
HARVEY, ROBERT C.
180 MAIDEN LANE
NEW YORK NY

[] DELETE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 or changed or on an attachment with an address, with all other like empowered

SIGNATURE:

ARTHUR ELINSON, Gen. Manager & VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

99 MAR -5 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1991

4. FEI Number

13-3576273

Applied For
Not Applicable

5. Certificate of Status Desired []

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution []

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax [] Yes [] No

10. Name and Address of New Registered Agent

300002800673-9
-03/10/99--01050--018
****150.00 ****150.00

Treasurer
Guillermo Payet
180 Maiden Lane
New York, N.Y.
Controller
Jose Chirinos
180 Maiden Lane
New York, N.Y.

Director
Ronald J. O'Keefe
180 Maiden Lane
New York, N.Y.

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