E NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000024257 (3)

ENTERPRISE LOGISTICS CORP.

FILED Feb 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
22111 ALTONA DR.		22111 ALTONA DR.					
BOCA RATON	FL 33428	BOCA RATON FL 33428				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						03/13/1996	
2. Principal Pl	ace of Business	2a, Mailing Address				4, FEI Number Applied For	
21 Cuito Ant 4	# ata	Suite Apt	# etc		.	APPLIED FOR 0727034 Not Applicable \$8.75 Additional	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired Fee Required	
City & State	•	· · ·	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	—	Country	•	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	25 Name and Address of Curre	29 ent Registered Agen	130			10. Name and Address of New Registered Agent	
CAI	renacci, anthony g			81	Name		
	11 ALTONA DR.			82	Chant	Address (D.O. Bay Number is Not Assentable)	
	CA RATON FL 33428				2(199()	Address (P.O. Box Number is Not Acceptable)	
				83			
				84	City	FL 85 Zip Code	
office or re	naistered agent or both in the Stai	to of Florida, Such ch	ange was author	izad hy	the corn	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered	
agent. I ar	n familiar with, and accept the obli	gations of Section 60	7.0505, Florida \$	Statutes	3.	, , , , , , , , , , , , , , , , , , , ,	
SIGNATURE	Signature typed or printed name of registered a	gent and title if applicable	(NOTE Regis	tered Age	nt signature	e required when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	Ц	DELETE 1	4 TITLE		Change L Addition	
NAME	CATENACCI, ANTHONY			.2 NAME			
STREET ADDRESS	22111 ALTONA DR.				ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	———		.4 CHY-S .1 TITLE	IT-ZIP	☐ Change ☐ Addition	
TITLE		L		2 NAME			
NAME AVECTA ADDRESS					ADDRESS		
STREET ADDRESS CITY-ST-ZIP			_	. 4 CITY - 5		· ·	
TITLE				1 TITLE	J. L.,	Change Addition	
NAME			3	2 NAME			
STREET ADDRESS					ADDRESS		
CITY - ST - ZIP			3	4. CITY-1	ST-ZIP		
TITLE			DELETE 4	.1 TITLE		Change Addition	
NAME			4	2 NAME			
STREET ADDRESS			4	.3 STREET	ADDRESS		
CITY-ST-ZIP			4	4 CITY - S	T-ZIP		
TITLE			DELETE 5	.1 TITLE		Change Addition	
NAME			5	.2 NAME]	1 27/148	
STREET ADDRESS			5	.3 STREET	ADDRESS	1 1 1 1 1 1 2 2 2 2 3 3 3 7	
CITY-ST-ZIP				4 CITY - S	T-ZIP	BARNETT MISSION BAY OF BOX 24644 BANK WEST PACH	
TITLE				.1 TITLE]	BARAGETT MISSIAN BAY NO	
NAME				2 NAME	1	Box 24644	
STREET ADDRESS			6	3 STREET	ADDRESS	DO DONA LIGHT BY	
CITY-ST-ZIP			6	4 CITY-S	T-ZIP	JAIDHIVE WEST THEM BEACH	

14. I hereby certify that the information supplied with this filing does not partially for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify by the certify by the certify by the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify by the certification indicated on this annual report or supplemental annual report is frue and accurate and that my signature shall have the same legal effect as if made under oath, that var can officer or director of the corporation or the receiver of the security by the certification of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation or the receiver of the corporation of the receiver of the receiver of the receiver of the receiver of the receive