FILED Aug 30, 2004 8:00 am Secretary of State

Not Applicable

\$8.75 Additional

Fee Required

2004 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P96000063685 08-30-2004 90010 015 ***150.00 1. Entity Name VITAL LOGISTICS INC. 24000000 Principal Place of Business Mailing Address 2023 APOPKA BLVD. POST OFFICE BOX 608017 ORLANDO, FL 32860-8017 APOPKA, FL 32703 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08182004 Chg-P CR2E034 (10/03) 4. FEI Number Applied For City & State ity & State

Country

lando

Ζip

CITY - ST - ZIP

SIGNATURE:

BLAKELY, PAUL 7701 CASASIA CT

Country

6. Name and Address of Current Registered Agent

59-3396232

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

5. Certificate of Status Desired

7. Name and Address of New Registered Agent

ORLANDO, FL 32811							
	·		City		FL	Zip Cod	e
the obligat	named entity submits this statement for the ions of registered agent			egistered agent, or both, i	in the State of Florida. I am fo		and accept
FILE NOWIII FEE IS \$550.00 Due by September 8, 2004 9. Election Campaign F Trust Fund Contribution Trust Fund Contribution			n Financing	\$5.00 May Be Added to Fees			•
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CH	IANGES TO OFFICERS AND	DIRECTOR	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLAKELY, PAUL 7701 CASASIA CT ORLANDO, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition

CITY-ST-ZIP

12. 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 report or supplemental 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered.

OF SIGNING OFFICER OR DIRECTOR