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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000052379 (9)

ENERGY LOGISTICS CORP.

Principal Place of Business 3901-B NW 77 AVENUE MIAMI FL 33166 Mailing Address

3901-B NW 77 AVENUE MIAMI FL 33166

FILED Jan 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3- Date Incorporated or Qualified 06/13/1997

Sulte. Apt. 6, etc. Stite. Apt. 6, etc. Stite. Apt. 6, etc. St. Certificate of Status Desired Se. Required Fee Requ	Z. Principal Place of Business			Za. Mailing Address				4. FEI Number Applied For		
City & State Country City & State Country City & State City & State Country City & State City &	21							65 - 076 3 73 1 Not Applical	ble	
City & State City & State City								Later tricate of Status Liestred		
Zip								6. Election Campaign Financing \$5.00 May Re	_	
Zip Country Zip Country 2	23			28				70.00		
28 25 28 30 Personal Property Tax due June 30.					Country					
HOBAN, CHIE K 7355 NW 41 STREET MIAMI FL 33166 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. It was overlained corporation submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. Such charge was authorized by the comporation's board of directors, I hereby accept the applications of, Section 607.0505, Rondos Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 29. ADDITIONS/CHANGES TO OFF	24	25 29 30								
TOUR TREE TO THE NOTE OF THE N						<u>'</u>		10. Name and Address of New Registered Agent		
7355 NW 41 STREET MIAMI FL 33166 182 Street Address (P.O. Box Number is Not Acceptable) 183 Street Address (P.O. Box Number is Not Acceptable) 184 City 185 Zip Code 187 City 188 Street Address (P.O. Box Number is Not Acceptable) 189 Street Address (P.O. Box Number is Not Acceptable) 180 Street Address (P.O. Box Number is Not Acceptable) 181 City 182 Street Address (P.O. Box Number is Not Acceptable) 183 Street Address (P.O. Box Number is Not Acceptable) 184 City 185 Zip Code 285 Zip Code	HOBAN CHIE K					81	Name			
MIAMI FL 33166 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 agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME HOBAN, CHIE-KYOUNG 7355 NW 41 STREET 13. SIRET JORGES MIAMI FL 33166 14. CITY-ST-2P MIAMI FL 33166 DELETE 13. TITLE OFLIFE 21. TITLE OFLIFE 21. TITLE Change Addition NAME STRET JORGESS CITY-ST-2P 12. AND STOP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LACTY-ST-2P MIAMI FL 33166 DELETE 3. STRET JORGESS CITY-ST-2P 12. AND STOP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LACTY-ST-2P Addition NAME STRET JORGESS CITY-ST-2P 12. TITLE Change Addition NAME STRET JORGESS CITY-ST-2P TITLE DELETE 3. STRET JORGESS CITY-ST-2P TITLE DELETE 3. STRET JORGESS CITY-ST-2P TITLE DELETE 5. STRET JORGESS CITY-ST-2P TITLE Change Addition NAME STRET JORGESS CITY-ST-2P TITLE DELETE 5. STRET JORGESS CITY-ST-2P TITLE Change Addition NAME STRET JORGESS CITY-ST-2P TITLE Change Addition Change Addition NAME STRET JORGESS CITY-ST-2P TITLE Change Addition Change Addition NAME STRET JORGESS CITY-ST-2P TITLE Change Addition Change Addition Addition Change Addition Change Addition Change Addition NAME STRET JORGESS CITY-ST-2P TITLE Change Addition Change Addition Change Addition Change Addition Change Addition Change	,					20	C+==+ A	Address (D.O. Day Niversay is Not Assessable)		
### STREET ADDRESS CITY-ST-ZIP TITLE						82	Street Ad	Address (P.O. Box Number is Not Acceptable)		
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 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, 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, 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, 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, or both and accept the obligations, or section of the purpose of changing its registered agent, or both and accept the obligations, or section of the purpose of changing its registered agent, or both and accept the obligations, or section of the purpose of changing its registered agent, or both and accept the obligations, or sections, and accept the obligations, and accept the obligations, and accept the obligations, or sections, and accept the obligation of the purpose of changing its registered agent, or both and accept the obligation of the purpose of the purpose of changing its registered agent, or both and accept the obligation of the purpose of the purpose of the purpose of the appointment as registered agent, or both and or segment and accept the purpose of the appointment as registered agent, and accept the appointment as registered agen						83			_	
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 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, and accept the obligations of, Section 607,0505, Florida Statutes. Signature						94	Citu	or 7in Code		
diffice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, it hereby accept the appointment as registered agent and manifer with, and accept the obligations of, section 607 0505, Florida Statutes. Signature Signature	•					64	City	FL 63 Zip Code		
Agent. I am Tamillar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, Typed or privated name of registrated agent aced title it applications. PATE Registrated Agent signature required when reinteriality.) 12.	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									
SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSTD HOBAN, CHIE-KYOUNG 7355 NW 41 STREET L3 STREET ADDRESS CITY-ST-2IP MIAMI FL 33166 DELETE 1.1 TITLE Change Addition Additio	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, typed or private rame of ingulational general and lite it applicables. (NOTE Replicated Agent value) (SATE) (S										
TITLE NAME HOBAN, CHIE-KYOUNG 1.2 NAME 7.355 NW 41 STREET 1.3 TREET ADDRESS CITY-ST-2IP	Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstalling) DATE									
NAME STREET ADDRESS (TYS-57-2P) MIAMI FL 33166 1.2 NAME 1.3 STREET ADDRESS (TYS-57-2P) MIAMI FL 33166 1.4 CITY-ST-2P) NAME STREET ADDRESS (TYS-57-2P) 1.4 CITY-ST-2P) 1.5 STREET ADDRESS (TYS-57-2P) 1.5 STREET ADDRESS (TYS-57-2P) 1.6 STREET ADDRESS (TYS-57-2P) 1.7 STREET ADDRESS (TYS-57-2P) 1.8 STREET ADDRESS (TYS-57-2P) 1.9 DELETE 1.1 TITLE 1.1 STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 STREET ADDRESS 1.5 STREET ADDRESS 1.	12.		ICERS AND DIR			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
STREET ADDRESS CITY-ST-ZIP MIAMI FL 33166 14.CITY-ST-ZIP TITLE DELETE 2.1 TIME 2.2 NAME STREET ADDRESS CITY-ST-ZIP 1.3 STREET ADDRESS CITY-ST-ZIP 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 3.1 TIME 3.3 STREET ADDRESS CITY-ST-ZIP 1.4 STREET ADDRESS CITY-ST-ZIP 1.5 NAME 3.6 STREET ADDRESS CITY-ST-ZIP 1.6 DELETE 3.1 TIME 3.1 TIME 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 1.5 NAME 3.5 STREET ADDRESS CITY-ST-ZIP 3.5 STREET ADDRESS CITY-ST-ZIP 1.6 DELETE 3.7 NAME 3.7 STREET ADDRESS CITY-ST-ZIP 1.7 STREET ADDRESS CITY-ST-ZIP 1.8 STREET ADDRESS CITY-ST-ZIP 1.	TITLE			L DEt	LETE	1.1 TITLE	ľ	Change Additi	on	
MIAMI FL 33166	NAME					1.2 NAME				
TITLE	STREET ADDRESS	7355 NW 41 STREE	ΞT			1.3 STREET A	DDRESS			
NAME	CITY-ST-ZIP	MIAMI FL 33166				1.4 CITY - ST	-ZIP			
STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	TITLE	,		☐ DEI	LETE .	2.1 TITLE		Change Additi	an	
CITY-ST-ZIP	NAME					2.2 NAME				
TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE Change Addition TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS CITY-ST-ZIP Change Addition STREET ADDRESS 4.4 CITY-ST-ZIP Change Addition NAME 5.2 NAME Change Addition STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP Change Addition NAME 5.2 NAME STREET ADDRESS CITY-ST-ZIP Change Addition NAME CHANGE CHANGE CHANGE Addition Addition NAME CHANGE CHANGE CHANGE Addition NAME CHANGE CHANGE CHANGE Addition NAME CHANGE CHANGE CHANGE CHANGE CHANGE STREET ADDRESS CHANGE CHANGE CHANGE CHANGE	STREET ADDRESS					2.3 STREET A	DDRESS			
NAME	CITY-ST-ZIP					2.4 CITY-ST	- žiP	.		
STREET ADDRESS CITY-ST-ZIP TITLE DELETE AJACRESS CITY-ST-ZIP TITLE AMME AGDRESS CITY-ST-ZIP TITLE AGDRESS CITY-ST-ZIP AGDRESS CITY-ST-ZIP TITLE AGDRESS CITY-ST-ZIP AGDRESS CITY-ST-ZIP TITLE AGDRESS CITY-ST-ZIP AGDRES	TITLE			☐ DEI	LETE	3.1 TITLE		Change Additi	οп	
CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME	NAME					3.2 NAME				
TITLE DELETE 4.1 TITLE Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS STREET ADDRES	STREET ADDRESS					3.3 STREET A	DDRESS			
TITLE	CITY-ST-ZIP					3.4. CITY-ST	-ZIP			
STREET ADDRESS CITY- ST-ZIP TITLE A4. CITY- ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.2 NAME STREET ADDRESS CITY- ST-ZIP 5.4 CITY- ST-ZIP TITLE 5.4 CITY- ST-ZIP TITLE 6.1 TITLE 6.1 TITLE Change Addition NAME STREET ADDRESS CITY- ST-ZIP TITLE 6.3 STREET ADDRESS CITY- ST-ZIP TITLE 6.4 CITY- ST-ZIP 1.4. 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	TITLE	•		☐ DEL	LETE			Change Additi	ດດ	
CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE 6.1 TITLE 6.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.5 STREET ADDRESS CITY-ST-ZIP 6.6 NAME 5.7 NAME 5.8 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.5 STREET ADDRESS CITY-ST-ZIP 6.5 STREET ADDRESS CITY-ST-ZIP 6.6 CITY-ST-ZIP 6.7 CITY-ST-ZIP 6.7 CITY-ST-ZIP 6.7 CITY-ST-ZIP 6.8 CITY-ST-ZIP 6.9 CIT	NAME				1	4. 2 NAME	1			
TITLE 5.1 TITLE 5.2 NAME NAME 5.2 NAME STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP TITLE 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 6.2 NAME STREET ADDRESS 6.4 CITY-ST-ZIP 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	STREET ADDRESS					4.3 STREET #	DDRESS			
NAME STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS CITY-ST-ZIP 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	CITY-ST-ZIP					4.4 CITY-ST	- ZIP		Ì	
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.4. 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	TITLE	•		DEL	LETE	5.1 TITLE		Change Additi	on	
CITY-ST-ZIP TITLE DELETE 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-ST-ZIP 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	NAME					5.2 NAME				
TITLE NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 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	STREET ADDRESS					5.3 STREET #	DDRESS			
TITLE NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 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	CITY-ST-ZIP					5.4 CITY - ST	-ZIP			
STREET ADDRESS CITY-ST-ZIP 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				☐ D£L				Change Additi	on	
STREET ADDRESS CITY-ST-ZIP 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	NAME				ı	6.2 NAME		· · · · ·		
CITY-ST-ZIP 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	STREET ADDRESS					6.3 STREET A	DDRESS			
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	i									
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 gath, that I am an	14. I hereby c	ertify that the information :	supplied with this	s filing does not c	qualify for the	e exempti	on stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information	'n	

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 if changed, or on an attachment with an address.

SIGNATURE:

Jan. 8, 1998 (305) 393-5819