SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

STATIA TERMINALS, INC.

DOCUMENT #
1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 29 1998 8:00am Secretary of State

								Y	-11					
Prin	cipal Place	e of B usines		Mailing Addr	ess				_با			DIEN BARK RIS	(A 1011040 1011041 1	1881
	FAIRWAY (E 295	DRIVE		-	900 FAIRWAY DRIVE									
		ACH FL 3344	!	DEERFIELD B	DEERFIELD BEACH FL 33441					DO NOT WRITE IN THIS SPACE				
US				US						3. Date Incorporated or Qualified 08/30/1983				
2. F	Principal Pi	lace of Busin	less	2a. Mailing Address					4. FEI Number Applied For				r	
21				26						59-2317192			Not Applica	elda
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	жx		Additiona Required	al	
City & State			City & State					6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution \$5.00 May Be Added to Fees						
L			Country				untry			8. This corporation owes or has paid the current year Intangible				
			25	29				. ,		Personal Property Tax due June 30				
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LINITED STATES CORPORATION COMPANY 81 Name														
UNITED STATES CORPORATION COMPANY							81 Name							
1201 HAYS STREET SUITE 105						82 Street Addres			dres	s (P.O. Box Number is Not Accepte	ble)			
TALLAHASSEE FL 32301														i
						1	B4 C	City			FI	85 Zip	p Code	
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.														
810	NATURE .		m, one decept and obliga											
L	·······	Signature, typed	or printed name of registered agen		(NOT	E Registere	d Agent	l signature re	quire	when reinstaling)	DATE			8
12.		.,	OFFICERS AN	D DIRECTORS		13.				ADDITIONS/CHANGES TO OF	FICERS A		FORS IN 1	2 }
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NAME			N, JAMES G.			2.2 NAM								
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ĺ	T ADDRESS		WAY DRIVE STE 295			4.3 STRE	-	DRESS.						
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•	T ADDRESS		WAY DR STE 295			6.3 STR		DRESS)
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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 if changed, or on an attachment with an address.

(954)698–0705