

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006322

FILED  
Feb 05, 2008  
Secretary of State

Entity Name: INTER-JET OCEAN TRANSPORT, INC.

**Current Principal Place of Business:**

5 HIGH RIDGE PARK  
STAMFORD, CT 06905

**New Principal Place of Business:**

**Current Mailing Address:**

5 HIGH RIDGE PARK  
STAMFORD, CT 06905

**New Mailing Address:**

FEI Number: 11-3330009      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR STE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C      ( ) Delete  
Name: HARTONG, HENDRIK J JR  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: VC      ( ) Delete  
Name: HARTNETT, KEVIN  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: D      ( ) Delete  
Name: LACCONA, GIORGIO  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: P      ( ) Delete  
Name: DIAZONA, MIGDALLA  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: VP      ( ) Delete  
Name: LEMBO, STEVEN  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

Title: S      ( ) Delete  
Name: ALTMAN, RICHARD  
Address: 5 HIGH RIDGE PARK  
City-St-Zip: STAMFORD, CT 06905

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK ATZBI

Electronic Signature of Signing Officer or Director

TREA

02/05/2008

\_\_\_\_\_ Date