


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # G66948	
1. Entity Name ISLAND TERMINAL COMPANY	

Principal Place of Business % GEORGE E. PATTERSON, JR. 7570 N.W. 14TH STREET MIAMI, FL 33126	Mailing Address PO BOX 141894 CORAL GABLES, FL 33114 US
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04192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2333785	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TRAVIESTO, JOSE R JR
 250 CATALONIA AVENUE
 SUITE 605
 CORAL GABLES, FL 33134

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANSUR, LUIS E. BACHSTRAAT 5, ORANJESTAD NETHERLAND, ANTILLES,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS TRAVIESO, JOSE R. JR 250 CATALONIA AVENUE, SUITE 605 MIAMI, FL 33134
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 05/11/07-80018-015 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jose R Travieso Jr **JOSE R TRAVIESO JR** 4.19.07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #