

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # K25893

Entity Name
INTERNATIONAL MARITIME SHIPS AGENTS, CORP.



Principal Place of Business
2945 N.W. 21 TERRACE
MIAMI, FL 33142-7019 US

Mailing Address
2945 N.W. 21 TERRACE
MIAMI, FL 33142-7019 US



01032006 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-0068818

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BABUN
BABUN, JOSE J
2945 NW 21 TERR
MIAMI, FL 33142

**DO NOT WRITE
IN THIS SPACE**

I, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

PD
BABUN-SELMAN, JOSE
3160 NW 14 ST
MIAMI, FL 33125

VPSD
BABUN, JOSE JESUS
12711 N.W. 6TH STREET
MIAMI, FL 331821162

VTD
BABUN, SARA CRISTINA
9250 S.W. 69TH STREET
MIAMI, FL 33173

000000397084
01/30/06-80035-010 150.00

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IN THIS SPACE**

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 Jesus Babun V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 1-18-06 Daytime Phone # 305 635 0490