2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State
04-17-2008 90009 037 ***150.00

DOCUMENT # K25893

1. Entity Name
INTERNATIONAL MARITIME SHIPS AGENTS, CORP.

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

DO NOT WRITE IN THIS SPACE

01042008 No Chg-P CR2E034 (11/05)

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
~~BABLIN~~, JOSE JESUS
2945 NW 21 TERR
MIAMI, FL 33142

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BABUN-SELMAN, JOSE
STREET ADDRESS	3160 NW 14 ST
CITY-ST-ZIP	MIAMI, FL 33125
TITLE	VPSD
NAME	BABUN, JOSE JESUS
STREET ADDRESS	12711 N.W. 6TH STREET
CITY-ST-ZIP	MIAMI, FL 331821162
TITLE	VTD
NAME	BABUN, SARA CRISTINA
STREET ADDRESS	9250 S.W. 69TH STREET
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 J. BABUN 4-3-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #