

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021842

FILED
Feb 28, 2007
Secretary of State

Entity Name: MARITIME MANAGEMENT, LLC

Current Principal Place of Business:

16441 NE 29TH AVE.
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

3363 NE 163 STREET
501
NORTH MIAMI BEACH, FL 33160

Current Mailing Address:

16441 NE 29TH AVE.
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

3363 NE 163 STREET
501
NORTH MIAMI BEACH, FL 33160

FEI Number: 26-0005966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALFONSO, NORBERTO
16441 NE 29TH AVE.
NORTH MIAMI BEACH, FL 33160 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

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: NORBERTO, ALFONSO
Address: 16441 NE 29 AVE.
City-St-Zip: MIAMI, FL 33160

Title: VP () Delete
Name: ALFONSO, MARTA
Address: 16441 NE 29 AVE.
City-St-Zip: MIAMI, FL 33160

Title: VP () Delete
Name: TORE, ODFJELL
Address: JYHAUGASEN 18
City-St-Zip: BERGEN,NORWAY, N 5072

Title: VP (X) Delete
Name: BETINE, FRANK
Address: NORDEIDEVEIEN 25
City-St-Zip: BERGEN, NORWAY, N 5072

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARTA ALFONSO

VP

02/28/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date