FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M08986

1. Corporation Name

SEABOARD WAREHOUSE TERMINALS, INC.

Principal Place of Business	Mailing Address
9350 S Dixie Hwy Suite 900	9350 S DIXIE HWY SUITE 900
Mami Fl 33156	MIAMI FL 33156

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90106 043 ***150.00

Principal Place of Business Mailing Address							-			
9350 S DIXIE HWY SUITE 900 9350 S DIXIE HWY SUITE 900									,	
MIAMI FL 33156 MIAMI FL 33156							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
							12/14/1984			
2. Principal P	lace of Business	2a. Mailing Address	·				4. FEI Number	App	lied For	
21		26				· .	59-2476590		Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certifcate of Status Desired	8.75 A		
22								Fee Red		
City & State City & State							1 - 11	\$5.00 i		
Zip	28						Added to	rees		
_	Country	Zip	30				8. This corporation owes the current year Intangible Personal Property Tax.			
24	9. Name and Address of Curre	29 Agent	[30]	T		——	10. Name and Address of New Registered Age			
				81	Nam	e				
	k, robert j.			90	- C-		on (D.O. Boy Mumbor in Mod Associable)			
9350) S DIXIE HWY., SUITE 900			82	Stre	a Addre	ess (P.O. Box Number is Not Acceptable)			
MIAN	/II FL 33156			83	 					
				-				-T		
				84	City		FL ⁸	5 Zip C	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE										
	Signature, typed or printed name of registered age				าt signatu	e required	ADDITIONS/CHANGES TO OFFICERS AND D	DECTO	25 IN 12	
12.	DV OFFICERS A	ND DIRECTORS		13.		Τ		Change	Addition	
NAME	BLANK, TONY	_ 5000	1.2 NAME							
STREET ADDRESS	9350 S DIXIE HWY #900				ADDRES					
	MIAMI FL		1	CITY-S		»			1	
CITY-ST-ZIP TITLE	DP	☐ DELET		TITLE	1-21	+-		Change	Addition	
NAME	BLANK, ANDREW			NAME					_	
STREET ADDRESS	9350 S DIXIE HWY #900				ADORE:	is l)		į	
CITY-ST-ZIP	MIAMI FL	ANALES ES			T-ZIP					
TITLE	DC DELETE 3.1 TI				, (- <u>eu</u> f	 		Change	Addition	
NAME	BLANK, MARK	_,		3.2 NAME			_	-	}	
STREET ADDRESS	9350 S DIXIE HWY #900		ı	3.3 STREET		is				
Crty-ST-ZIP	MIAMI FL			CITY-S						
TITLE	ST	☐ DELET		πιε		\top		Change	Addition	
NAME	PUCK, ROBERT J.		4. 2	NAME		}]	
STREET ADDRESS	9350 S DIXIE HWY #900		4.3	STREET	ADDRES	s				
CITY-ST-ZIP	MIAMI FL			4.4 CITY-S						
TITLE		☐ DELET		5.1 TITLE				Change	☐ Addition	
NAME			5.2	NAME		-			}	
STREET ADDRESS			53	STREET	ADDRES	s				
CITY-ST-ZIP				CITY-S1	T-ZIP					
TITLE		☐ DELET	_	TITLE				Change	☐ Addition	
NAME			6.2	NAME					1	
STREET ADDRESS			6.3	STREET	ADORES	s			}·	
CITY-ST-ZIP	_		6.4	CITY-S1	T-ZIP				.]	

14. I hereby certify that the information suppled with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information mental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an perfective or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supple officer or director of the corporation of Block 12 or Block 13 if changed, or an annual report of the corporation of the corporation of Block 12 or Block 13 if changed, or an annual report of the corporation of the cor

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR