

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90094 039 ***150.00

DOCUMENT # P30211

1. Entity Name
NETWORK SHIPPING LTD., INC.

C0029262



DO NOT WRITE IN THIS SPACE

Principal Place of Business 800 DOUGLAS ENTRANCE CORAL GABLES FL 33134	Mailing Address 800 DOUGLAS ENTRANCE CORAL GABLES FL 33134
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country	Country
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4. FEI Number 65-0204942	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABU-GHAZALEH, MOHAMMAD 800 DOUGLAS ENTRANCE CORAL GABLES FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP EL-NAFFY, HANI 800 DOUGLAS ENTRANCE CORAL GABLES FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS COTTINGHAM, DUDLEY 16 PAR LA VILLE RD HAMILTON HM BER-MUDA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MANCILLA ESTAY, SERGIO A 800 DOUGLAS ENTRANCE CORAL GABLES FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HORNBACHER, BRADLEY D. 800 DOUGLAS ENTRANCE - NORTH TOWER, 12F CORAL GABLES FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THOMPSON, PETER 800 DOUGLAS RD., N TOWER, 12TH FL CORAL GABLES FL 33134

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

VP/S
Zoltan Pinter
800 Douglas Entrance, N.TWR, 12th Floor
Coral Gables, FL 33134

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Zoltan Pinter, Secretary Date: 16 Feb 00 Daytime Phone #: 305-520-8056

CR2E034 (9/99)