FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P94000060774 (4) DOCUMENT #
1. Corporation Name

INTERAMERICA SHIPPING AGENCY, INC.

Principal Place of Business 196 N.E. OTH CTOCCT

Mailing Address

FILED Apr 23 1996 8:00 am Secretary of State



MIAMI FL 33132		125 N.E. 91H STREET MIAMI FL 33132					
					3. Date incorporated or Qualified 08/18/1994	3a. Date of 10/2	Last Report 2 7/1995
 1	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	1	Applied For
21		26					Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	–		5. Certificate of Status Desired	8 1 \$	8.75 Additional
City & State			City & State		6.50-7-0		Fee Required
23		28	man *		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for intangible tax under s 199,032,		
24	25	29	30			□No	100,002
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New R	egistered Age	nt
			81	Name			
	ISA, FRANK L JR		82	82 Street Address (P.O. Box Number is Not Acceptable)			
	S. 9TH STREET					٠,	
MIAM! F	FL 33132		83				
			84	City		FI ⁸	5 Zip Code
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508. Florida Statute	s, the above-	l named coroo	oration submits this statement for the purp		no ite registered effice
	ed agent, or both, in the State of Floric h, and accept the obligations of, Secti			oration's boa	pration submits this statement for the purp ard of directors. I hereby accept the appo	intment as regi	stered agent. I am
SIGNATURE _							
12.	Signature, typed or printed name of registered agent			ıt signature requir	ed when reinstating)	DATE	
TITLE T	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFI		
NAME	ROVIROSA, FRANK L JR	[] DETELE	1. 1 TITLE				hange 🔲 Addition
STREET ADDRESS	125 N.E. 9TH ST.		1.2 NAME				
	MIAMI FL 33132		1.3 STREET	ADDRESS			
CITY-ST-ZIP TITLE	D	[] DELETE	14 CHTY - S	T-ZIP			
NAME	ROVIROSA, RICHARD		2 1 TITLE			Cr	hange 🗌 Addition
STREET ADDRESS	125 N.E. 9TH ST.		2.2 NAME				
CITY-ST-ZIP	MIAMI FL 33132		2 3 STREET	1			
1/JLE	THE WATER COLOR	DELETE	2 4 CITY - S 3 1 TITLE	T- ZIP		F 7 6	
NAME		Dotter	1			□ C+	nange 🔲 Addition
STREET ADDRESS			3.2 NAME				
CITY - ST - ZIP			33 STREET				
TITLE		TT DELETE	3.4 City-S 4. 1 Title	1 - ZIP		F) (1	anno Di Addition
NAME			4.2 NAME			CH	nange 🔲 Addition
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S	i i			
TITLE		☐ DELETE	5 1 TITLE	1-2119		Cn	annon
NAME		<u></u>	5.2 NAME			FJ 0	lange
STREET ADDRESS			53 STREET	ADDRESS			1
CHTY-ST-ZIP			5.4 CITY - ST				
THILE		DELETE	6 1 TITLE	411		Ch	lange
NAME			6.2 NAME				aute TT Workfold
STREET ADDRESS			63STREET	ADORESS			
CITY-ST-ZIP			64 CITY-ST				
	certify that the information supplied w	ith this filing is voluntarily furnis	shed and does	not qualify f	for the exemption stated in Section 119.0	7/3)/k) Florida (Statutos I fuebas

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 12, 1996 (305) 373-4765