

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

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90144 025 ***150.00

DOCUMENT # P95000008184

1. Corporation Name

INTER-MARITIME CONTAINER LINES FLORIDA, INC.



Principal Place of Business

~~2601 N.W. 104TH COURT~~ 11200 N.W. 25TH ST.
MIAMI FL 33172
US

Mailing Address

~~2601 N.W. 104TH COURT~~ 11200 N.W. 25TH ST.
MIAMI FL 33172
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1995

4. FEI Number

65-0564614

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 11200 N.W. 25TH ST.
Suite, Apt. #, etc.

2a. Mailing Address

26 SAME
Suite, Apt. #, etc.

City & State

23 MIAMI FLORIDA

City & State

28 SAME

Zip

Country

24 33172

25

USA

Zip

Country

29

30

9. Name and Address of Current Registered Agent

VAZQUEZ, MARCELLIMO

2601 N.W. 104TH COURT 11200 N.W. 25TH STREET
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/10/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
MANN, ROBERT B.
STREET ADDRESS
45 EAST END AVENUE
CITY-ST-ZIP
NEW YORK NY

TITLE ☐ DELETE

NAME
MANN, HOWARD B.
STREET ADDRESS
55 EAST END AVENUE
CITY-ST-ZIP
NEW YORK NY

TITLE ☒ DELETE

NAME
MANN, HOWARD B
STREET ADDRESS
2601 N.W. 104TH COURT
CITY-ST-ZIP
MIAMI FL 33172

TITLE ☒ DELETE

NAME
VAZQUEZ, MARCELINO
STREET ADDRESS
2601 N.W. 104TH COURT
CITY-ST-ZIP
MIAMI FL 33172

TITLE ☐ DELETE

NAME
FRIEDLANDER, ERIC A
STREET ADDRESS
124 S. GLENWOOD ROAD
CITY-ST-ZIP
FAMWOOD NJ

TITLE ☐ DELETE

NAME
VAZQUEZ, MARCELIMO
STREET ADDRESS
2601 N.W. 104TH COURT
CITY-ST-ZIP
MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

V.P.
MARCELINO VAZQUEZ
11200 N.W. 25TH STREET
MIAMI FLORIDA 33172

14. 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 annual report or supplemental 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

3/11/99

305-592-6158

CR2E034 (11/98)