

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000041527

Entity Name: CMA-CGM (CARIBBEAN), INC.

FILED  
Jan 10, 2006  
Secretary of State

## Current Principal Place of Business:

3625 NW 82ND AVENUE  
MIAMI, FL 33166652

## New Principal Place of Business:

## Current Mailing Address:

3625 NW 82ND AVENUE  
MIAMI, FL 33166652

## New Mailing Address:

FEI Number: 65-0665859

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHIFF, JAMES M  
9130 SO DADELAND BLVD. STE 1609  
MIAMI, FL 33156 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDT ( ) Delete  
Name: SAADE, RODOLPHE J MR  
Address: 4 QUAI D'ARENC  
City-St-Zip: MARSEILLES, FR 13235 FR

Title: MD ( ) Delete  
Name: MARTINS, JEAN-SERGE MR  
Address: 707 CRANDON BLVD  
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: DIR ( ) Delete  
Name: FALGUIERE, LAURENT MR  
Address: 4 QUAI D'ARENC  
City-St-Zip: MARSEILLES, FR 13235 FR

Title: SEC ( ) Delete  
Name: RONSSIN, ETIENNE M MR  
Address: 9845 SW 138 ST  
City-St-Zip: MIAMI, FL 33176 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ETIENNE RONSSIN

SEC

01/10/2006

Electronic Signature of Signing Officer or Director

Date