

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033090

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: MARPESCA SEATRADE LLC

## Current Principal Place of Business:

7337 N.W. 37TH AVE., BAY #4  
MIAMI, FL 33147 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 133569  
HIALEAH, FL 330130569 US

## New Mailing Address:

FEI Number: 77-0608360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PICANS, DARIO M  
7337 N.W. 37TH AVE., BAY #4  
MIAMI, FL 33147 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

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: PICANS, DARIO  
Address: P.O. BOX 133569  
City-St-Zip: HIALEAH, FL 330130569 US

Title: MGRM ( ) Delete  
Name: LYMBEROPULOS, FOTIS  
Address: P.O. BOX 133569  
City-St-Zip: HIALEAH, FL 330130569

Title: MGRM ( ) Delete  
Name: LYMBEROPULOS, DIONISIO  
Address: P.O. BOX 133569  
City-St-Zip: HIALEAH, FL 330130569

Title: MGRM ( ) Delete  
Name: LYMBEROPULOS, PANAGIOTIS  
Address: P.O. BOX 133569  
City-St-Zip: HIALEAH, FL 330130569

## ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DARIO M. PICANS

RA

04/29/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date