

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000079862

Entity Name: INTERCOASTAL MARINE LOGISTIC, INC.**Current Principal Place of Business:**7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819**Current Mailing Address:**7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819 US**FEI Number: 59-3737585****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LARSON ACCOUNTING & CONSULTING SERVICE LLC
7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819 US*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**Officer/Director Detail :**

Title	P
Name	ANASTACIO JUNIOR, ROMEU HILÁRIO
Address	7901 KINGSPONTE PARKWAY SUITE 17
City-State-Zip:	ORLANDO FL 32819

Title	VP
Name	PORTELLA HILARIO, ELIANE
Address	7901 KINGSPONTE PARKWAY SUITE 17
City-State-Zip:	ORLANDO FL 32819

Title	TREASURER
Name	PORTELLA HILARIO, NATHÁLIA
Address	7901 KINGSPONTE PARKWAY SUITE 17
City-State-Zip:	ORLANDO FL 32819

Title	SECRETARY
Name	PORTELLA HILARIO, MARIANA
Address	7901 KINGSPONTE PARKWAY SUITE 17
City-State-Zip:	ORLANDO FL 32819

I hereby 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 all other like empowered.

SIGNATURE: ROMEU HILARIO ANASTACIO JUNIOR**PRESIDENT****03/22/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date