2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070094

Entity Name: FLORIDA INTERNATIONAL TERMINAL, LLC

Current Principal Place of Business:

3800 MCINTOSH RD PORT EVERGLADES, FL 33316

Current Mailing Address:

PO BOX 460970 FT LAUDERDALE, FL 33346

FEI Number: 20-2737471

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI 201 S. BISCAYNE BOULEVARD STE 1500 (LAD) MIAMI, FL 33131 US Certificate of Status Desired: Yes

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

Authorized Person(s) Detail :

Authorized Person(s) Detail.			
Title	CHAIRMAN	Title	DIRECTOR
Name	BITAR, JAVIER	Name	LARRAIN, ROBERTO
Address	PO BOX 460970	Address	PO BOX 460970
City-State-Zip:	FORT LAUDERDALE FL 33346	City-State-Zip:	FORT LAUDERDALE FL 33346
Title	DIRECTOR	Title	DIRECTOR
Name	DIAZ, YURIK	Name	GARCIA-HUIDOBRO, ALEJANDRO
Address	PO BOX 460970	Address	PO BOX 460970
City-State-Zip:	FORT LAUDERDALE FL 33346	City-State-Zip:	FORT LAUDERDALE FL 33346
Title	VP	Title	CFO
Title Name	VP DIAZ, JOSE A	Title Name	CFO PINOCHET, LUIS
Name	DIAZ, JOSE A PO BOX 460970	Name	PINOCHET, LUIS PO BOX 460970
Name Address	DIAZ, JOSE A PO BOX 460970	Name Address	PINOCHET, LUIS PO BOX 460970
Name Address City-State-Zip:	DIAZ, JOSE A PO BOX 460970 FORT LAUDERDALE FL 33346	Name Address City-State-Zip:	PINOCHET, LUIS PO BOX 460970 FORT LAUDERDALE FL 33346
Name Address City-State-Zip: Title	DIAZ, JOSE A PO BOX 460970 FORT LAUDERDALE FL 33346 DIRECTOR	Name Address City-State-Zip: Title	PINOCHET, LUIS PO BOX 460970 FORT LAUDERDALE FL 33346 DIRECTOR
Name Address City-State-Zip: Title Name	DIAZ, JOSE A PO BOX 460970 FORT LAUDERDALE FL 33346 DIRECTOR MONTALBETTI, FRANCO PO BOX 460970	Name Address City-State-Zip: Title Name	PINOCHET, LUIS PO BOX 460970 FORT LAUDERDALE FL 33346 DIRECTOR MANCILLA, LUIS PO BOX 460970

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSE A. DIAZ

VP

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date