## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30211

Entity Name: NETWORK SHIPPING LTD., INC.

**Current Principal Place of Business:** 

241 SEVILLA AVENUE CORAL GABLES. FL 33134

**Current Mailing Address:** 

P.O. BOX 149222 ATTN: LEGAL DEPT.

CORAL GABLES. FL 33114-9222 US

FEI Number: 65-0204942 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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

Officer/Director Detail:

Title Title D/P

ABU-GHAZALEH, MOHAMMAD EL-NAFFY, HANI Name Name

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVENUE, ATTN: LEGAL

DEPT. DEPT.

CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134 City-State-Zip:

Title D/CFO/SENIOR VICE PRESIDENT Title SENIOR VICE PRESIDENT/GC/AS

CONTRERAS, RICHARD Name Name JORDAN, BRUCE A

241 SEVILLA AVENUE, ATTN: LEGAL 241 SEVILLA AVENUE, ATTN: LEGAL Address Address

DEPT. DEPT.

CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134 City-State-Zip:

VICE PRESIDNET, CORPORATE Title Title **TREASURER** 

**FINANCE** 

Address

Name THOMPSON, PETER M Name VICENTE, MONICA

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVENUE, ATTN: LEGAL DEPT.

DEPT.

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY

Title VICE PRESIDENT SHIPPING

COTTINGHAM, DUDLEY R. Name **OPERATIONS** 

LUTTY, HELMUTH Address C/O CONTINENTAL MANAGEMENT Name

LIMITED 241 SEVILLA AVENUE, ATTN: LEGAL

CENTURY HOUSE, 16 PAR-LA VILLE DEPT. ROAD

CORAL GABLES FL 33134 City-State-Zip: HAMILTON BERMUDA HM08 City-State-Zip:

## Continues on page 2

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.

04/17/2014 SIGNATURE: BRUCE A. JORDAN **SECRETARY** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Apr 17, 2014

**Secretary of State** 

CC8301336673

Date

## Officer/Director Detail Continued:

Address

Title RESIDENT REPRESENTATIVE Title ASST. SECRETARY

Name MORRIS, S. ARTHUR Name CONTINENTAL CORPORATE SERVICES LTD., .

C/O CONTINENTAL MANAGEMENT LIMITED

CENTURY HOUSE, 16 PAR-LA-VILLE ROAD

Address

C/O CONTINENTAL MANAGEMENT

City-State-Zip: HAMILTON BERMUDA HM08

LIMITED
CFNTUR

CENTURY HOUSE, 16 PAR-LA-VILLE

ROAD

City-State-Zip: HAMILTON BERMUDA HM08