


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # 397326 1. Entity Name BERNUTH MARINE SHIPPING, INC.	
----------------------------------------------------------------------	-----------------------------------------------------------------------------------

Principal Place of Business 3163 N.W. SOUTH RIVER DRIVE MIAMI, FL 33142	Mailing Address 3163 N.W. SOUTH RIVER DRIVE MIAMI, FL 33142
-------------------------------------------------------------------------------	-------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



01262004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1394984	Applied For No: Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MONOCANDILOS, JORDAN
 3201 NW 24TH ST RD
 MIAMI, FL 33142

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MONCANDILOS, THEODORA 3201 NW 24TH ST RD MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MONCANDILOS, JORDAN 3201 NW 24TH ST RD MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CHABO, JORGE 320 NW 24 STREET RD MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MONCANDILOS, NICOLAS 3201 NW 24TH ST RD MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000150112
 05/03/04-80213-007 158.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____