

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

APPROVED
AND
FILED

96 AUG 29 AM 7:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #556283 (0)

1. Corporation Name

Embert Shipping, Inc.

Principal Place of Business

1325 N.W. 78 Avenue
Suite No. 201
Miami, Fl. 33126

Mailing Address

1325 N.W. 78 Avenue
Suite No. 201
Miami, Fl. 33126

3. Date Incorporated or Qualified
12/19/1977

3a. Date of Last Report
/ /95

2. Principal Place of Business

21 1325 N.W. 78 Ave.

Suite, Apt. #, etc.

22 #201

City & State

23 Miami, Fl. 33126

24 Zip
33126

Country

25 U.S.A.

2a. Mailing Address

26 1325 N.W. 78 Ave.

Suite, Apt. #, etc.

27 #201

City & State

28 Miami, Fl. 33126

29 Zip
33126

Country

30 U.S.A.

4. FEI Number

59-1813768

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

Albornoz, Emmie T.
1325 N.W. 78 Avenue
Suite No. 201
Miami, Fl. 33126

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

Date:

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME Alborno, Emmie T.
STREET ADDRESS 1325 N.W. 78 Avenue #201
CITY - ST - ZIP Miami, Fl. 33126

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

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NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Emmie T. Alborno Emmie T. Alborno August 29, 1996 (305)591-8771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Day-Month-Year

CR2E034 (3/96)