


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90354 020 ***150.00

DOCUMENT # 568541

1. Entity Name
OCEANIC STEVEDORING COMPANY



Principal Place of Business
1007 N. AMERICA WAY
5TH FLOOR
MIAMI, FL 33101 US

Mailing Address
PO BOX 015359
MIAMI, FL 33101 US

2. Principal Place of Business
 Suite, Apt. #, etc.


3. Mailing Address
10 P + O Ports North America, Inc.
99 Wood Ave. South - 8th Fl.

City & State
Iselin, New Jersey

City & State
Iselin, New Jersey

Zip
08830

Country
USA



04192004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent
QUINN, DONALD T
1007 NO AMERICA WAY
MIAMI, FL 33132

4. FEI Number
59-1918860

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
 Name
CT Corporation System
 Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
 City
Plantation FL Zip Code
33324

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.

Jill E. Kranz
Assistant Secretary

SIGNATURE  DATE **4/23/04**

(NOTE: Registered Agent Signature Required when registering)

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

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

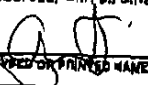
10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	PD	Delete
	QUINN, DONALD T	2100 S OCEAN DR	FT LAUDERDALE, FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	QUINN, DANIEL J	1361 LUGO AVENUE	CORAL GABLES, FL 33158	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	PD	Change	Addition
	Gary Willmot	99 Wood Ave. South - 8th Floor	Iselin, N.J. 08830	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Rob Scavone	99 Wood Ave. South - 8th Floor	Iselin, N.J. 08830	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Chris Morton	1007 N. America Way - 5th Floor	Miami, FL 33132	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 807, 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:  **Gary Willmot** DATE **4/27/04** **732-635-3839**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #