## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 610097 (8)

INTERNATIONAL BULK SHIPPING, INC.

## **FILED** May 04 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address			1 (621/6 Alie) (191/ 691/ 691/ 691/ 191/ 196/ 616/ 616/		
210 \$ MAGNOLIA AVE STE B			210 S MAGNOLIA AVE STE B				
TAMPA FL 33608		TAMPA FL 33606		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					02/15/1979		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26			59-1893926	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27			9. Commonto di Citato Desireo	Fee Required	
City & State		City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be	
3		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	··		8. This corporation owes or has paid the cul Personal Property Tax due June 30.	rrent year Intangible Yes  No	
24 25 25 Q. Name and Address of Current		29  t Registered Agent			10. Name and Address of New Registered Agent		
LUBRANO, ANTONIO M				81 Name			
210 S MAGNOLIA STE B			_		(10 p 11 ) (11)		
TAMPA FL 33808			8:	2 Street Address (P.O. Box Number is Not Acceptable)			
			8:	3			
		_	. 0		[an] 7: 0-7:		
			8	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 Fforida. 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 obliqations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
Signature, typied or printed naise of registerest agent and title if applicable (NOI			I. Registered Agent signature requir				
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE PTO	UM DEDNIN U W	L) DELETE	1.1 TITLE			Change Addition	
	BRUHN, BERND H W 4405 W WOODMERE ROAD TAMPA, FL 00000		1.2 NAME  1.3 STREET ADDRESS				
7410							
TITLE SVD		DELETE	1.4 CITY - 2.1 TITLE	SI-ZIP		Change Addition	
	RANO, ANTONIO M	C) precit	2.1 HILE 2.2 NAME			El cuando El recenou	
	E DAVIS BLVD		1	1 ADORESS			
	PA, FL 00000		2.4 CITY				
TITLE	71412 00000	DELETE				Change Addition	
NAME			3.2 NAME			•	
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAM				
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY	ST-ZIP			
TITLE	☐ DELETE		5 1 TITLE		☐ Change ☐ Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP		The ear	5.4 CITY-	\$T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME			6.2 NAM				
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP	at the information amplied a	itti thic filma done not muclifi. I	6.4 CITY-		(in Section 119.07(3)(i) Elevida Statutas I furlhas a	artify that the information	
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of trustee corporated to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attackment with an address.							