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2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 12, 2006 8:00 am Secretary of State DOCUMENT # F02000005000 05-12-2006 90028 025 ***550.00 NFB MARITIME, INC. Principal Place of Business Mailing Address 40091676 275 BROADHOLLOW ROAD 275 BROADHOLLOW ROAD MELVILLE, NY 11747 MELVILLE, NY 11747 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01182006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 42-1553215 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FI 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150:00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 President (7) PΩ Delete TITLE TIT! F Michael Lynch ☐ Change Addition KANAS, JOHN A NAME NAME 1535 SE 17th Street STREET ADDRESS 275 BROADHOLLOW ROAD STREET ADDRESS CITY-ST-ZIP MELVILLE, NY 11747 CITY-ST-ZIP FOIT Lauderdale, FL VT (5) TITLE •☐ Delete ☐ Change Addition DIGIACOMO, JOHN N Hike Scallin NAME NAME 1535 SE ITH Street STREET ADDRESS 275 BROADHOLLOW ROAD STREET ADDRESS CITY-ST-ZIP MELVILLE, NY 11747 CITY-ST-ZIF oft Lauderdale FL 33316 s (D) TITLE ☐ Delete TITLE Addition | George Shull 1535 SE 17th Street CAMPBELL, AURELIE S NAME NAME STREET ADDRESS 275 BROADHOLLOW ROAD STREET ADDRESS CITY-ST-ZIP MELVILLE, NY 11747 CITY-ST-ZIP FOIT Lauderdale Delete TITLE TITLE Addition Change NAME BOHLSEN, JOHN NAME STREET ADDRESS 275 BROADHOLLOW ROAD STREET ADDRESS CITY-ST-ZIP MELVILLE, NY 11747 CITY-ST-ZIP Delete TITLE DV TITLE ☐ Change ☐ Addition NAME HEALY, DANIEL M NAME 275 BROADHOLLOW ROAD STREET ADDRESS STREET ADDRESS MELVILLE, NY 11747 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition MASTROIANNI, CARMEN NAME STREET ADDRESS 275 BROADHOLLOW ROAD STREET ADDRESS MELVILLE, NY 11747 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 syndidress, with eff or the given end.

NING OFFICER OR DIRECTOR

FILED

Daytime Phone #