2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007473

CAROPRESO, OLIVICRO

FT LAUDERDALE, FL 33312

3752 SW 30 AVE.

Name:

Address:

City-St-Zip:

Entity Name: OVERSEAS TRANSPORT USA CORP.

FILED Apr 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3752 SW 30 AVE. FT LAUDERDALE, FL 33312 **Current Mailing Address: New Mailing Address:** 701 BRICKELL AVENUE 3752 SW 30 AVE FT LAUDERDALE, FL 33312 SUITE 3000 MIAMI, FL 33131 FEI Number: 20-4960306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE STE 3000 MIAMI, FL 33131 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CAROPRESO, RICCARDO Name: Name: 3752 SW 30 AVE. Address: Address: City-St-Zip: FT LAUDERDALE, FL 33312 City-St-Zip: Title: DV Title: DVP () Delete (X) Change () Addition MINNA, LUCA Name: Name: MINNA, LUCA 3752 SW 30 AVE 3752 SW 30 AVE Address: Address: FT LAUDERDALE, FL 33312 FT LAUDERDALE, FL 33312 City-St-Zip: City-St-Zip: () Delete Title: DS Title: () Change () Addition MINNA, GIOVANNA Name: Name: 3752 SW 30 AVE. Address: Address: City-St-Zip: FT LAUDERDALE, FL 33312 City-St-Zip: Title: DT () Delete Title: (X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

CAROPRESO, OLIVIERO

FT LAUDERDALE, FL 33312

3752 SW 30 AVE.

SIGNATURE: RICCARDO CAROPRESO DP 04/03/2007