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

**PROFIT** CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

Apr 03 1997 8:00am

Secretary of State

Addition

## DOCUMENT # F9400001037 (0)

WALLENIUS LINES NORTH AMERICA, INC.

Principal Place of Business Mailing Address ATTN: VICE PRESIDENT. FINANCE **SUITE 1107 188 BROADWAY** JACKSONVILLE FL 82225 WOODCLIFF LAKE NJ 07675-8067 3. Date Incorporated or Qualified 3a. Date of Last Report 03/02/1994 01/26/1996 2. Principal Place of Businoss 2e. Mailing Address 4. FEI Number Applied For SEE correction above 21 SEE CORRECTION ABOVE 51-0268314 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 **Elorida Statutes** 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **D.LEON/WALLENIUS LINES** 9550 REGENCY SQ. BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **BARNETT REGENCY TOWER, STE. 1107** 83 JACKSONVILLE FL 32225 84 City 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 and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change **★** Addition 1.1 TITLE NAME EBELING, RAYMOND P CLEMENT, JAMES P. 1.2 NAME **188 BROADWAY** 188 BRADWIM STREET ADDRESS 1.3 STREET ADDRESS WOODCLIFF# LAKE NJ Note correction WOODCLIFF LAKE CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change TITLE VSTD 2.1 TITLE Addition VANNA, JOHN A NAME 2.2 NAME **188 BROADWAY** STREET ADDRESS 2.3 STREET ADDRESS Note correction WOODCLIFF# LAKE NJ CITY-ST-ZIP 2.4 CITY-\$1-7IP DELETE Change TITLE 31 111LF Addition JONES, GR NAME 3.2 NAME **188 BROADWAY** STREET ADORESS 3.3 STREET ADDRESS WOODCLIFF LAKE NJ Note correction CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TOLE Change Addition NAME CONNOR, CHRISTOPHER J 4. 2 NAME **188 BROADWAY** STREET ADDRESS 4.3 STREET ADDRESS **WOODCLIFF LAKE NJ** CITY-ST-ZIP 4.4 CITY - ST- 2IP DELETE TITLE Change Addition 5.1 7/1LE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

**63 STREET ADDRESS** 

6.4 C(TY-ST-Z)P 14. I do hereby 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 eath; that I am an officer or director of the corporation or the regover or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name

6.1 TITLE

6.2 NAME

DELE 1E