2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004265

Entity Name: TOPAZ INTERNATIONAL SHIPPING INC.

FILED Jan 08, 2004 Secretary of State

Littly Name: TOPAZ INTERNATIONAL SHIFFING, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
	SHIP MANAGI FH AMERICA V 33132 US					
Current Mailing Address:				New Mailing Address:		
	SHIP MANAGI TH AMERICA V 33132 US					
FEI Number:	65-0843216	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Registered Agent:
DAVIS, MARK S 1015 NORTH AMERICA WAY MIAMI, FL 33132 US				DAVIS, MARK S 1015 NORTH AMERICA WAY SUITE 128 MIAMI, FL 33132 US		
The above in the State		ubmits this statement for the pu	irpose of	f changing it	s registered	office or registered agent, or both,
SIGNATURE:				01/08/2004		
	Electroni	c Signature of Registered Ager	nt			Date
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS	AND DIRECT	ORS:		ADDITION	S/CHANGES	S TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D () KOLK, GLENN G 520 BRICKELL I MIAMI, FL 3313	(EY #1606		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () KOLK, HILDA 520 BRICKELL I MIAMI, FL	Delete KEY #1606		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () MCAULIFFE, DA 520 BRICKELL I MIAMI, FL			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P () KATSOUFIS, PA 1015 NORTH AN MIAMI, FL 3313	IERICA WAY		Title: Name: Address: City-St-Zip:	KATSOUFIS, I	AMERICA WAY
Title: Name: Address: City-St-Zip:	T () DAVIS, MARK S 1015 NORTH AN MIAMI, FL 3313			Title: Name: Address: City-St-Zip:	DAVIS, MARK	AMERICA WAY
Title: Name: Address: City-St-Zip:	KATSOUFIS, LA	IERICA WAY SUITE 128		Title: Name: Address: City-St-Zip:	KATSOUFIS, I	AMERICA WAY SUITE 128

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: LAMBROS KATSOUFIS S/D 01/08/2004