

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90259 009 ***150.00

DOCUMENT # F99000000487

1. Entity Name
V. SHIPS AGENCY INC.



Principal Place of Business
1015 N. AMERICA WAY, SUITE 121
MIAMI, FL 33132 US

Mailing Address
1015 N. AMERICA WAY, SUITE 121
MIAMI, FL 33132 US

44025942

2. Principal Place of Business
1015 N. AMERICA WAY
Suite, Apt. #, etc. SUITE - 121
City & State MIAMI FL
Zip 33132 Country USA

3. Mailing Address
1015 N. AMERICA WAY
Suite, Apt. #, etc. SUITE - 121
City & State MIAMI FL
Zip 33132 Country USA

04062004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0896061 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 *Nelson Rengifo* NELSON RENGIFO MANAGING DIRECTOR 04/06/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CRAWFORD, A.S. GATE HOUSE, 1 FARRNIGDON STREET LONDON EC4M 7NS. ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING DIRECTOR NELSON RENGIFO 620 NW 133 CT. MIAMI, FL 33182 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEVINE, J.P. GATE HOUSE, 1 FARRNIGDON STREET LONDON EC4M 7NS. ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARKER, A.N. GATE HOUSE, 1 FARRNIGDON STREET LONDON EC4M 7NS. ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAMS, JACK B 1330 WEST AVE. #1410 MIAMI BEACH, FL 33139 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I 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 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 an address, with all other like empowered.

SIGNATURE: *Nelson Rengifo* NELSON RENGIFO 04/06/04 305-579-9236
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #