

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
95 JUN 23 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G68598
1. Corporation Name

Sealift Terminals, Inc.

Principal Place of Business

Mailing Address

4250 Lakeside Drive
Suite 110
Jacksonville, Fl 32210

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/09/1983 3a. Date of Last Report 03/18/1994
4. FEI Number 59-2396872 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ YES ☐ NO

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

W.A. Burgstiner, III
4250 Lakeside Drive
Suite 110
Jacksonville, Fl 32210

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 transferring)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY- ST- ZIP
1 P/D Burgstiner, William A. Jr. 4250 Lakeside Drive #110 Jacksonville, Fl 32210
2 S/T Vantassel, Charles 1500 N. Post Oak Dr #140 Houston, TX
3 y/D Vantassel, Charles 1500 N. Post Oak Dr. #140 Houston TX
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65
66
67
68
69
70
71
72
73
74
75
76
77
78
79
80
81
82
83
84
85
86
87
88
89
90
91
92
93
94
95
96
97
98
99
100

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1 1 TITLE ☐ Change ☐ Addition
2 2 NAME
3 3 STREET ADDRESS
4 4 CITY- ST- ZIP
5 5 TITLE ☐ Change ☐ Addition
6 6 NAME
7 7 STREET ADDRESS
8 8 CITY- ST- ZIP
9 9 TITLE ☐ Change ☐ Addition
10 10 NAME
11 11 STREET ADDRESS
12 12 CITY- ST- ZIP
13 13 TITLE ☐ Change ☐ Addition
14 14 NAME
15 15 STREET ADDRESS
16 16 CITY- ST- ZIP
17 17 TITLE ☐ Change ☐ Addition
18 18 NAME
19 19 STREET ADDRESS
20 20 CITY- ST- ZIP
21 21 TITLE ☐ Change ☐ Addition
22 22 NAME
23 23 STREET ADDRESS
24 24 CITY- ST- ZIP
25 25 TITLE ☐ Change ☐ Addition
26 26 NAME
27 27 STREET ADDRESS
28 28 CITY- ST- ZIP
29 29 TITLE ☐ Change ☐ Addition
30 30 NAME
31 31 STREET ADDRESS
32 32 CITY- ST- ZIP
33 33 TITLE ☐ Change ☐ Addition
34 34 NAME
35 35 STREET ADDRESS
36 36 CITY- ST- ZIP
37 37 TITLE ☐ Change ☐ Addition
38 38 NAME
39 39 STREET ADDRESS
40 40 CITY- ST- ZIP
41 41 TITLE ☐ Change ☐ Addition
42 42 NAME
43 43 STREET ADDRESS
44 44 CITY- ST- ZIP
45 45 TITLE ☐ Change ☐ Addition
46 46 NAME
47 47 STREET ADDRESS
48 48 CITY- ST- ZIP
49 49 TITLE ☐ Change ☐ Addition
50 50 NAME
51 51 STREET ADDRESS
52 52 CITY- ST- ZIP
53 53 TITLE ☐ Change ☐ Addition
54 54 NAME
55 55 STREET ADDRESS
56 56 CITY- ST- ZIP
57 57 TITLE ☐ Change ☐ Addition
58 58 NAME
59 59 STREET ADDRESS
60 60 CITY- ST- ZIP
61 61 TITLE ☐ Change ☐ Addition
62 62 NAME
63 63 STREET ADDRESS
64 64 CITY- ST- ZIP
65 65 TITLE ☐ Change ☐ Addition
66 66 NAME
67 67 STREET ADDRESS
68 68 CITY- ST- ZIP
69 69 TITLE ☐ Change ☐ Addition
70 70 NAME
71 71 STREET ADDRESS
72 72 CITY- ST- ZIP
73 73 TITLE ☐ Change ☐ Addition
74 74 NAME
75 75 STREET ADDRESS
76 76 CITY- ST- ZIP
77 77 TITLE ☐ Change ☐ Addition
78 78 NAME
79 79 STREET ADDRESS
80 80 CITY- ST- ZIP
81 81 TITLE ☐ Change ☐ Addition
82 82 NAME
83 83 STREET ADDRESS
84 84 CITY- ST- ZIP
85 85 TITLE ☐ Change ☐ Addition
86 86 NAME
87 87 STREET ADDRESS
88 88 CITY- ST- ZIP
89 89 TITLE ☐ Change ☐ Addition
90 90 NAME
91 91 STREET ADDRESS
92 92 CITY- ST- ZIP
93 93 TITLE ☐ Change ☐ Addition
94 94 NAME
95 95 STREET ADDRESS
96 96 CITY- ST- ZIP
97 97 TITLE ☐ Change ☐ Addition
98 98 NAME
99 99 STREET ADDRESS
100 100 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Burgstiner 6/4/95 388-4591