2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # K25893

1. Entity Name

INTERNATIONAL MARITIME SHIPS AGENTS, CORP.



FILED Jan 18, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2945 N.W. 21 TERRACE MIAMI, FL 33142-7019 US 2945 N.W. 21 TERRACE MIAMI, FL 33142-7019 US



01062005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0068818 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

BABLIN, JOSE J 2945 NW 21 TERR MIAMI, FL 33142

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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 Signature, typed or printed name of registered agent and this it applicable (NOTE. Registered Agent signature required when reinstaling) DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BABUN-SELMAN, JOSE 3160 NW 14 ST MIAMI, FL 33125					01/19/05-80076-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD BABUN, JOSE JESUS 12711 N.W. 6TH STREET MIAMI, FL 331821162	_		· 		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD BABUN, SARA CRISTINA 9250 S.W. 69TH STREET MIAMI, FL 33173				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. Thereby 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 of trustee exclusive 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 a latent with all ther like empowered.						