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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K41897

(5)

ANTILLEAN MARINE SHIPPING, CORP.

Principal Place of Business	Mailing Address
3038 NW NORTH RIVER DR	3038 NW NORTH RIVER DR
MIAMI FL 33142	MIAMI FL 33142

**FILED** Jan 29 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/28/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0097587 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent **B1** Name KELLEY, ALLAN R ESQ. 100 S.E. 2ND ST. 82 Street Address (P.O. Box Number is Not Acceptable) 18TH FLOOR 83 MIAMI FL 33131 84 City 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 (NOTF: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETE Change TITLE 1.1 TITLE **BUBUN, JOSE** NAME 1.2 NAME 3160 NW 14 ST STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition BABUN, SARA C. NAME 2.2 NAME 9250 SW 69TH STREET STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE Change 31 TITLE ALVAREZ, ELIO R NAME 3.2 NAME 3038 NW NORTH RIVER DR STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition PADRON, JOSE C NAME 4. 2 NAME 5766 NW 98TH COURT STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 4.4 CITY - ST- ZIP CITY-ST-ZIF TITLE DELETE 5.1 TITLE Change Addition BABUN, MIREYA NAME 5.2 NAME 1714 FERDINAND ST 5.3 STREET ADDRESS STREET ADDRESS **CORALGABLES FL** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE BABUN, JOSE J. NAME 6.2 NAME 2945 NW 21 TERR STREET ADDRESS 6.3 STREET ADDRESS MIAMI FL

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 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, open an attachment with an address.