

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002736

FILED
Apr 28, 2005
Secretary of State

Entity Name: INTERNATIONAL MARITIME ASSOCIATES L.C.

Current Principal Place of Business:

500 SE 17TH ST.
SUITE 224
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

500 SE 17TH ST.
SUITE 224
FORT LAUDERDALE, FL 33316 US

New Mailing Address:

FEI Number: 65-1022454 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARMER, SABRINA B
500 SE 17TH ST.
SUITE 224
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FARMER, SABRINA B MRS.
Address: 2721 SW 34TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33312 US

Title: MGRM () Delete
Name: TORTORA, MARK P MR.
Address: 1021 SE 11TH CT.
City-St-Zip: FT. LAUDERDALE, FL 33316 US

Title: MGR () Delete
Name: FARMER, ADRIAN R MR.
Address: 2721 SW 34TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33312 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SABRINA B. FARMER

MGR

04/28/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date