2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L01000002981

Entity Name: MARINE CARGO LINE, L.C.

FILED Oct 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10813 NW 30 STREET SUITE 107 MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

10813 NW 30 STREET SUITE 107 MIAMI, FL 33172

FEI Number: 65-1084093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHARKO, JOHN L 1164 CEDAR FALLS DRIVE WESTON, FL 33327 US

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:

City-St-Zip:

Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: CEO Title: () Change () Addition () Delete ELKIN. ALAN Name: Name: ONE BLUE HILL PLAZA Address: Address: City-St-Zip: PEARL RIVER, NY 10965 City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, HECTOR Name: Name: Address: ONE BLUE HILL PLAZA Address: City-St-Zip: PEARL RIVER, NY 10965 City-St-Zip: Title: () Delete Title: () Change () Addition WAGNER, ARTHUR Name: Name: ONE BLUE HILL PLAZA Address: Address: City-St-Zip: PEARL RIVER, NY 10965 City-St-Zip: Title: TS () Delete Title: () Change () Addition Name: VENDING, RICHARD Name: Address: ONE BLUE HILL PLAZA Address: City-St-Zip: PEARL RIVER, NY 10965 City-St-Zip: Title: () Delete Title: DIR () Change (X) Addition SHARKO, JOHN L Name: Name: 10813 NW 30 STREET, SUITE 107 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

MIAMI, FL 33172

SIGNATURE: HECTOR RODRIGUEZ SVP 10/14/2009