

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070094

FILED
Jun 23, 2009
Secretary of State

Entity Name: FLORIDA INTERNATIONAL TERMINAL, LLC

Current Principal Place of Business:

3800 MCINTOSH RD
PORT EVERGLADES, FL 33316

New Principal Place of Business:

Current Mailing Address:

PO BOX 460970
FT LAUDERDALE, FL 33346

New Mailing Address:

FEI Number: 20-2737471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BOULEVARD
STE 1500
MIAMI, FL 33131 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: GARCIA-HUIDOBRO, ALEJANDRO G
Address: 201 S. BISCAYNE BLVD., SUITE 1500
City-St-Zip: MIAMI, FL 33131

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

Title: MGR () Delete
Name: LARRAIN, ROBERTO
Address: 201 S. BISCAYNE BLVD., SUITE 1500
City-St-Zip: MIAMI, FL 33131

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

Title: MGR () Delete
Name: RAWLINS, ALBERTO
Address: 201 S. BISCAYNE BLVD., SUITE 1500
City-St-Zip: MIAMI, FL 33131

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

Title: MGR () Delete
Name: RIOJA, FELIPE
Address: 201 S. BISCAYNE BLVD., SUITE 1500
City-St-Zip: MIAMI, FL 33131

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

Title: MGR () Delete
Name: ROBLES, MAURICIO
Address: 201 S. BISCAYNE BLVD., SUITE 1500
City-St-Zip: MIAMI, FL 33131

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

Title: MGR () Delete
Name: DIAZ, JOSE A
Address: 201 S. BISCAYNE BLVD., SUITE 1500
City-St-Zip: MIAMI, FL 33131

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

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.

SIGNATURE: JOSE A. DIAZ

MGR

06/23/2009

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