

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000048086

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** CARIBBEAN AMERICAN SHIPPING EXPRESS LLC

**Current Principal Place of Business:**

3989 PEMBROKE ROAD  
HOLLYWOOD, FL 33021 US

**New Principal Place of Business:**

**Current Mailing Address:**

3989 PEMBROKE ROAD  
HOLLYWOOD, FL 33021 US

**New Mailing Address:**

**FEI Number:** 30-0558024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DESPAGNE, MAYBELINE D  
3760 SW 48TH AVE  
206  
PEMBROKE PARK, FL 33023 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/MANAGERS:**

**Title:** MGRM  
**Name:** DESPAGNE, MAYBELINE D  
**Address:** 3760 SW 48TH AVE APT 206  
**City-St-Zip:** PEMBROKE PARK, FL 33023 US

**Title:** MGRM  
**Name:** DUGUE, MARIE R  
**Address:** 3760 SW 48TH AVE. APT 206  
**City-St-Zip:** PEMBROKE PARK, FL 33023 US

I hereby 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:** MAYBELINE D. DESPAGNE

MGRM

04/14/2010

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