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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L77421

TECMARINE EXPRESS, INC.

Principal Place	e of Business	Mailing Address				T SERVICE OUT SERVICE DE BISSIO STREET FLOS DESIL		1811 91911 1881	
9900 N.W. 25TH STREET		9900 N.W. 25TH STREET							
MIAMI FL 33172-2224 US		MIAMI FL 33172-2224 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
						06/04/1990			
• Detection D	lace of Business	2a. Mailing Addre				4. FEI Number	T An	plied For	
·	lace of Business	<u> </u>	33			65-0019426	·	t Applicable	
21 Suito Ant	# ata	26 Suite, Apt. #,	etc			05 00 19420	\$8.75		
Suite, Apt. #, etc.		27				5. Certifcate of Status Desired		quired	
City & State	е	City & State			- 	6. Election Campaign Financing	\$5.00	Máy Be	
23		28				Trust Fund Contribution	Added t		
Zip	Country	Zip		Country		a. This corporation owes the current year Ir	tangible		
24	25	29	30			Personal Property Tax.		□No	
	9. Name and Address of Curre					10. Name and Address of New Registered	Agent		
				81	Name				
MARI	INE CARGO MANAGEMENT, IN	C.		82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
9900	N.W. 25TH STREET			02	Street Addit	ess (F.O. Box Number is Not Acceptable)			
MIAN	/fl FL 33172-2224			83					
				24	O 14.		85 Zip (nde	
				84	City	FI	_ 65 210 (2000	
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations are secured to the collection of the provisions of	of Florida, Such chanc	je was authori 505, Florida S	zed by Statutes.	ine corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	r changing its intment as re	registered gistered	
0,0,0,0,0	Signature, typed or printed name of registered age								
					it signature required	d when reinstating) DATE	ND DISECTO	DC 1140	Ó
12.	OFFICERS A	ND DIRECTORS		13.	it signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS A			14 /00
12.	OFFICERS AI		LETE 1.	13. .1 TITLE	nt signature required	· · · · · · · · · · · · · · · · · · ·	ND DIRECTO	ORS IN 12	(44/00)
	OFFICERS AID CHESTER, BRITT K.	ND DIRECTORS	1 LETE 1.	13. .1 TITLE .2 NAME		· · · · · · · · · · · · · · · · · · ·			(11/08)
TITLE	OFFICERS AND DISCHESTER, BRITT K. 9900 NW 25TH STREET	ND DIRECTORS	1 LETE 1.	13. .1 TITLE .2 NAME .3 STREET	T ADDRESS	· · · · · · · · · · · · · · · · · · ·			25024 (11/08)
TITLE NAME	OFFICERS AI D CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI`FL	ND DIRECTORS	1. LETE 1. 1. 1. 1.	13. .1 TITLE .2 NAME .3 STREET .4 CITY-ST	T ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition ·	CD25034 /11/08)
TITLE NAME STREET ADDRESS	OFFICERS AID CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI FL	ND DIRECTORS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13. .1 TITLE .2 NAME .3 STREET .4 CITY-ST	T ADDRESS	· · · · · · · · · · · · · · · · · · ·			CD2C024 /11/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AID CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI`FL D CHESTER, JEREMY	ND DIRECTORS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	131 TITLE .2 NAME .3 STREET .4 CITY-ST .1 TITLE	T ADDRESS T- ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition ·	CD2C024 /11/08)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AT D CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI'FL D CHESTER, JEREMY 9900 NW 25TH STREET	ND DIRECTORS	1 1 1 1 1 1 1 2 2 2 2 2	13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME	T ADDRESS T- ZIP T ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition ·	CD2C034 /11/08/
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS =CITY-ST-ZIP====================================	OFFICERS AT D CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI'FL D CHESTER, JEREMY 9900 NW 25TH STREET	ND DIRECTORS ☐ DE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13. .1 TITLE .2 NAME .3 STREET .4 CITY-ST .1 TITLE .2 NAME .3 STREET .4 CITY ₃ S .1 TITLE .2 NAME	T ADDRESS T-ZIP T ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition Addition	(POSCUSA /11/08)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ====================================	OFFICERS AID CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI'FL D CHESTER, JEREMY 9900 NW 25TH STREET =MIAMI-FL	ND DIRECTORS ☐ DE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13. 1 TITLE 2 NAME 3 STREET 4 CITY-SI 1 TITLE 2 NAME 3 STREET 4 CITY ₂ S 1 TITLE 12 NAME 13 STREET 13 STREET 13 STREET	T ADDRESS T. ZIP T ADDRESS ST. ZIP	ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition Addition	(B) (11/08)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AT D CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI FL D CHESTER, JEREMY 9900 NW 25TH STREET MIAMI FL	ND DIRECTORS DE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	131 TITLE .2 NAME .3 STREET .4 CITY-S1 .1 TITLE .2 NAME .3 STREET .4 CITY-S .1 TITLE .4 CITY-S .1 TITLE .2 NAME .3 STREET .4 CITY-S .1 TITLE .3 STREET .4 CITY-S .1 TITLE .4 CITY-S .1 TITLE .2 NAME .3 STREET .4 CITY-S	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS ST-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Change ☐ Change	Addition Addition Addition	(80/11/08/
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AT D CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI FL D CHESTER, JEREMY 9900 NW 25TH STREET MIAMI FL	ND DIRECTORS DE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	131 TITLE .2 NAME .3 STREET .4 CITY-ST .1 TITLE .2 NAME .3 STREET .4 CITY-S .1 TITLE .2 NAME .3 STREET .4 CITY-S .1 TITLE .3 STREET .4 CITY-S .1 TITLE .2 NAME .3 STREET .4 CITY-S .1 TITLE .3 STREET .4 CITY-S .3 STREET .4 CITY-S .3 STREET .4 CITY-S	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	(41/08)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AT D CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI FL D CHESTER, JEREMY 9900 NW 25TH STREET MIAMI FL	ND DIRECTORS DE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	131 TITLE .2 NAME .3 STREET .4 CITY-ST .1 TITLE .2 NAME .3 STREET .4 CITY-S .1 TITLE .3 STREET .3 STREET .4 CITY-S .1 TITLE .3 STREET .4 CITY-S .1 TITLE	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Change ☐ Change	Addition Addition Addition	(41/08)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AID CHESTER, BRITT K. 9900 NW 25TH STREET MIAMI'FL D CHESTER, JEREMY 9900 NW 25TH STREET MIAMI'FL	ND DIRECTORS DE	1. LETE 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	13. 1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 12 NAME 13 STREET 14 CITY-S 1 TITLE 12 NAME 13 STREET 14 CITY-S 1 TITLE 15 NAME 16 CITY-S 17 TITLE 17 TITLE 18 NAME 18 STREET 18 CITY-S 18 TITLE 18 T	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	(41,08)

14. I hereby certify that the information supplied with this filing does not quality 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 structure 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 emprovered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with any address with all other like empowered.

SIGNATURE:

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90097 010 ***158.75