

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M31937

FILED
Apr 29, 2009
Secretary of State

Entity Name: CONTINENTAL STEVEDORING & TERMINALS, INC.

Current Principal Place of Business:

1850 ELLER DRIVE
SUITE 403
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

1850 ELLER DRIVE
SUITE 403
FORT LAUDERDALE, FL 33316 US

New Mailing Address:

FEI Number: 59-2784048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUGGAR, THOMAS E
1391 TIMBERLANE ROAD
TALLAHASSEE, FL 32312 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MULDOON, JOSEPH III
Address: 1850 ELLER DRIVE SUITE 403
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DST () Delete
Name: DUGGAR, THOMAS E
Address: 1391 TIMBERLANE ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCOB (X) Change () Addition
Name: MULDOON, JOSEPH III
Address: 1850 ELLER DRIVE SUITE 403
City-St-Zip: FORT LAUDERDALE, FL 33316

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

Title: DP () Change (X) Addition
Name: CHRISTIAN, MICHAEL
Address: 1850 ELLER DRIVE SUITE 403
City-St-Zip: FORT LAUDERDALE, FL 33316

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 or supplemental report is true and accurate and that my electronic 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL CHRISTIAN

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date