

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000514

FILED  
Jan 04, 2007  
Secretary of State

**Entity Name:** GENERAL MARITIME SERVICES, INC.

**Current Principal Place of Business:**

10880 NW 27TH STREET  
SUITE 200  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

10880 NW 27TH STREET  
SUITE 200  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** 42-1581408      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GERMI, ALI A  
10880 NW 27TH STREET  
SUITE 200  
MIAMI, FL 33172 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GERMI, ALI A  
Address: 10880 NW 27TH STREET #200  
City-St-Zip: MIAMI, FL 33172

Title: VD ( ) Delete  
Name: BERLANGA, JOYCE  
Address: 7270 N.W. 35TH TERRACE, SUITE 201  
City-St-Zip: MIAMI, FL 33122

Title: D ( ) Delete  
Name: SIGLER, MARIA  
Address: 6940 N.W. 12 STREET  
City-St-Zip: MIAMI, FL 33136

Title: TD ( ) Delete  
Name: ORIZONDO, MAGGIE  
Address: 10975 NW 29TH STREET  
City-St-Zip: MIAMI, FL 33172

Title: SD ( ) Delete  
Name: HERNANDEZ, BETTY  
Address: 6940 NW 12 STREET  
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALI GERMI

PRES

01/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date