

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102333

FILED
Feb 29, 2008
Secretary of State

Entity Name: INTERORIENT NAVIGATION (USA), INC.

Current Principal Place of Business:

95 MERRICK WAY
STE 507
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

95 MERRICK WAY
STE 507
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-1068335 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUARTE, EUGENIO
95 MERRICK WAY
SUITE 514
CORAL GABLES, FL 33134 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: D () Delete
Name: LISSOW, JAN
Address: 3 THALIA STREET
City-St-Zip: LIMASSOL,, CY CY-3504 CY

Title: D () Delete
Name: THEOPHILIDES,, SAVVAS
Address: 3 THALIA ST
City-St-Zip: LIMASSOL, CY CY-3504 CY

Title: D () Delete
Name: PAPADOPOULOS, THEMIS
Address: 3 THALIA ST
City-St-Zip: LIMASSOL, CY CY-3504 CY

Title: P () Delete
Name: KORFIOTIS, THANOS
Address: 12785 SW 105 TERRACE
City-St-Zip: MIAMI, FL 33186 US

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:

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: KORFIOTIS THANOS

P

02/29/2008

Electronic Signature of Signing Officer or Director

_____ Date