2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Sep 09, 2004 8:00 am Secretary of State **DOCUMENT # P00000117729** 09-09-2004 90005 033 ***158.75 1. Entity Name INDEL MARINE USA CORP. Principal Place of Business Mailing Address SALLTIO 1777 SOUTHEAST 15TH STREET #422 1777 SOUTHEAST 15TH STREET #422 FORT LAUDERDALE, FL 33316 FORT LAUDERDALE, FL 33316 2. Principal Place of Business 3. Mailing Address 5300 N.W. 12th AVE 5300 N.W. Suite, Apt. #, etc. UNIE 2 Suite, Apt. #, etc. 08192004 CR2E034 (10/03) Chg-P UNIT City & State City & State 4. FEI Number Applied For LAuderdale LAuderdale ort 02-0575321 Not Applicable zip *3*3309 Country \$8.75 Additional 5. Certificate of Status Desired DROWARD BROWARN Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WESTBERG, NILS A Street Address (P.O. Box Number is Not Acceptable) 1777 SOUTHEAST 15TH STREET #422 FORT LAUDERDALE, FL. 33316 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D ☐ Delete TITLE ☐ Change ☐ Addition NAME BERLONI, ANTONIO NAME STREET ADDRESS ZONA ARTIGIANALE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I-61019 S. AGATA FETRIA (PU), MLE □ Delete TITLE ☐ Change ☐ Addition DESPREAUX, MICHEL NAME NAME STREET ADDRESS 710 13TH ST W STREET ADDRESS CITY-ST-ZIP PALMETTO, FL 34221 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME WESTBERG, NILS A NAME . STREET ADDRESS STREET ADDRESS 1777 SE 15TH ST., #422 CITY-ST-ZIP FT. LAUDERDALE, FL 33316 CITY-ST-ZIP ☐ Change TITLE TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CETY-ST-7IP TIN E ☐ Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

*A- M

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

FILED