2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State
05-02-2007 90099 048 ***150.00

DOCUMENT # P02000047978

1. Entity Name
FLORIDA MARINE AGENCIES INC.

Principal Place of Business	Mailing Address
3795 N.W. S. RIVER DRIVE MIAMI, FL 33142	3795 N.W. S. RIVER DRIVE MIAMI, FL 33142

04242007 Chg-P CR2E034 (...06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8224 NW 30th Terrace	8224 NW 30th Terrace
Suite, Apt. #, etc.: Unit 24	Suite, Apt. #, etc.: Unit 24
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33122 Country: Dade	Zip: 33122 Country: Dade

4. FEI Number: 02-0592816 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARKUS, ALAN K 1320 SOUTH DIXIE HIGHWAY SUITE 1045 CORAL GABLES, FL 33146	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LOPEZ, JUAN 2347 W. 66 PLACE HIALEAH, FL 33016	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LLAURADO, JULIA 2347 W. 66 PLACE HIALEAH, FL 33016	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD PACHECO, ISRAEL 3795 N.W. S. RIVER DRIVE MIAMI, FL 33142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AVENDANO, JUAN CARLOS 3795 N.W. S. RIVER DRIVE MIAMI, FL 33142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: [signature] JULIA LLAURADO S.D 4/28/07 3056347374
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #