2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000008606

Entity Name: FTZ SHIP AND DUTY FREE SUPPLIES, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2335 N.W. 107 AVE., WH #B41 2335 N.W. 107 AVE., WH #B40 MIAMI, FL 33173

MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

2335 N.W. 107 AVE., WH #B40 2335 N.W. 107 AVE., WH #B41

MIAMI, FL 33173 MIAMI, FL 33172

FEI Number: 36-4547067 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ESCOBAR, VITA ESCOBAR, VITA

2335 N.W. 107 AVE., WH #B41 2335 N.W. 107 AVE., WH #B40 MIAMI, FL 33172 MIAMI, FL 33173

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: 04/29/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete

Name: ESCOBAR, VITA 2335 N.W. 107 AVE., WH #B40 Address:

City-St-Zip: MIAMI, FL 33173

() Delete Title: **VPSD**

Name: JUAN, YOLANDA

2335 N.W. 107 AVE., WH #B40 Address:

MIAMI, FL 33173 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

Name: ESCOBAR, VITA

2335 N.W. 107 AVE., WH #B41 Address:

City-St-Zip: MIAMI, FL 33172

Title: **VPSD** (X) Change () Addition

Name: JUAN, YOLANDA

Address: 2335 N.W. 107 AVE., WH #B41

MIAMI, FL 33172 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VITA ESCOBAR **PRES** 04/29/2005