2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087581

Entity Name: OCEAN LINES LOGISTICS, INC.

FILED Apr 13, 2012 Secretary of State

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

5960 NW 99 AVE.

UNIT#2

DORAL, FL 33178 US

Current Mailing Address: New Mailing Address:

5960 NW 99 AVE.

UNIT#2

DORAL, FL 33178 US

FEI Number: 33-1094023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JASINKI, PAUL A
5960 NW 99 AVE
UNIT # 2
MIAMI, FL 33178 US

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5960 NW 99 AVE
UNIT # 2
MIAMI, FL 33178 US

JASINSKI, PAUL A
5960 NW 99 AVE
UNIT # 2
MIAMI, FL 33178 US

VIIAIVII, FL 33176 U3

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.

iii tile State of Florida.

SIGNATURE: PAUL A. JASINSKI 04/13/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 JASINSKI, PAUL A

 Address:
 13501 SW 99TH STREET

 City-St-Zip:
 MIAMI, FL 33186 US

Title: VP

 Name:
 NICOLAS, NAJIB

 Address:
 16221 SW 49 CT

 City-St-Zip:
 MIRAMAR, FL 33027 US

Title: TD

Name: NICOLAS, MICHEL Address: 16239 SW 49 CT City-St-Zip: MIRAMAR, FL 33027 US

Title: DVP

 Name:
 CAPUTO, MARIO

 Address:
 8526 NW 115 PL

 City-St-Zip:
 DORAL, FL 33178 US

Title: S, D

 Name:
 MELILLO, CONCETTINA

 Address:
 8526 NW 115 PL

 City-St-Zip:
 DORAL, FL 33178 US

I hereby 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 all other like empowered.

SIGNATURE: NAJIB NICOLAS VP 04/13/2012