2006 FOR PROFIT CORPORATION

Aug 24, 2006 8:00 am Secretary of State **ANNUAL REPORT** 04-27-2006 90160 043 ***150 00 DOCUMENT # P05000040802 1. Entity Name USA NAUTICAL SERVICES, INC. Principal Place of Business Mailing Address 1840 SW 22ND STREET FOURTH FLOOR 1840 SW 22ND STREET FOURTH FLOOR MIAMI, FL 33145 MIAMI, FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242006 CR2E034 (11/05) City & State City & State Applied For 4. FEI Number -2518190 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Recistered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PTD ☐ Change Addition TITLE ☐ Delete TITLE VALENCIA, CARLOS CASA NAME NAME 1840 SW 22ND STREET FOURTH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33145 CITY-ST-ZIP VSD TITLE ☐ Delete TITLE ☐ Change ☐ Addition ECHEVARRIA, MARIBEL NALIF NAME 1840 SW 22ND STREET FOURTH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33145 CITY-ST-ZiP Change ☐ Addition TITLE ☐ Delote TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

TITLE

NAME STREET ADDRESS

TITLE

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ATTACHMENT

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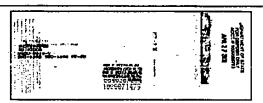
- 2800 PONCE DE LEON BLVD CORAL GABLES FL 33134 66023442 = #195000040802 BANK USE ONLY 255 1 1 4311

ACCOUNT NUMBER 96-6044-6684

CLOSING DATE 05/31/2006

USA NAUTICAL SERVICES INC 1840 SW 22ND ST 4TH FL CORAL GABLES FL 33145-2748

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