2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# P05000153967

Entity Name: PORT OF MIAMI SEAMANS CENTER, INC.

Current Principal Place of Business:

1007 N. AMERICA WAY STE. 100
MIAMI, FL 331322026

New Principal Place of Business:

Current Mailing Address:

1007 N. AMERICA WAY STE. 100
MIAMI, FL 331322026

New Mailing Address:

FEI Number: 84-1694852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANY, AYOUB
1007 N. AMERICA WAY STE. 100
MIAMI, FL 331322026 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CARROLL, THOMAS
Address: 1007 N. AMERICA WAY STE. 100
City-St-Zip: MIAMI, FL 331322026

Title: T ( ) Delete
Name: TADROS, MAGED
Address: 1007 N. AMERICA WAY STE. 100
City-St-Zip: MIAMI, FL 331322026

Title: V ( ) Delete
Name: JAFFEY, PHILLIP
Address: 1007 N AMERICA WAY STE 100
City-St-Zip: MIAMI, FL 33132

Title: S ( ) Delete
Name: AYOUB, HANY
Address: 1007 N AMERICA WAY STE 100
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: HANY AYOUB S 04/28/2008

Electronic Signature of Signing Officer or Director — Date