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May 22, 2001 8:00 am  
Secretary of State

05-22-2001 90043 008 \*\*\*150.00

PROFIT CORPORATION  
ANNUAL REPORT  
2001

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P26285

1. Corporation Name

SEABOARD EXPORT CORPORATION OF DELAWARE

Principal Place of Business

1500 PORT BLVD.  
DODGE ISLAND  
MIAMI FL 33132

Mailing Address

1500 PORT BLVD.  
DODGE ISLAND  
MIAMI FL 33132

553043

DO NOT WRITE IN THIS SPACE

|                                |  |                     |  |                                                                                 |  |
|--------------------------------|--|---------------------|--|---------------------------------------------------------------------------------|--|
| 2. Principal Place of Business |  | 2a. Mailing Address |  | 3. Date Incorporated or Qualified                                               |  |
| 21                             |  | 26                  |  | 10/03/1989                                                                      |  |
| Suite, Apt. #, etc.            |  | Suite, Apt. #, etc. |  | 4. FEI Number                                                                   |  |
| 22                             |  | 27                  |  | 43-6065475                                                                      |  |
| City & State                   |  | City & State        |  | 5. Certificate of Status Desired                                                |  |
| 23                             |  | 28                  |  | <input type="checkbox"/> \$8.75 Additional Fee Required                         |  |
| Zip                            |  | Zip                 |  | 6. Election Campaign Financing                                                  |  |
| 24                             |  | 29                  |  | Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees    |  |
| Country                        |  | Country             |  | 7. This corporation owes the current year intangible                            |  |
| 25                             |  | 30                  |  | Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

8. Name and Address of Current Registered Agent

CT CORPORATION  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

|    |                                                    |
|----|----------------------------------------------------|
| 81 | Name                                               |
| 82 | Street Address (P.O. Box Number is Not Acceptable) |
| 83 |                                                    |
| 84 | City                                               |
| FL | 85 Zip Code                                        |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS |                        | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                            |
|----------------------------|------------------------|-------------------------------------------------------|----------------------------|
| TITLE                      | P                      | 1.1 TITLE                                             | President                  |
| NAME                       | RODRIGUES, J. E        | 1.2 NAME                                              | John Lynch                 |
| STREET ADDRESS             | 9000 W. 67TH ST.       | 1.3 STREET ADDRESS                                    | 8050 N.W. 79th             |
| CITY-STATE-ZIP             | SHAWNEE MISSION KS     | 1.4 CITY-STATE-ZIP                                    | Miami, FL 33166            |
| TITLE                      | T                      | 2.1 TITLE                                             | Director                   |
| NAME                       | BRESKY, HARRY H        | 2.2 NAME                                              |                            |
| STREET ADDRESS             | 200 BOYLSTON STREET    | 2.3 STREET ADDRESS                                    |                            |
| CITY-STATE-ZIP             | CHESTNUT HILL MA 02167 | 2.4 CITY-STATE-ZIP                                    |                            |
| TITLE                      | EV                     | 3.1 TITLE                                             |                            |
| NAME                       | ROMERO, RAUL           | 3.2 NAME                                              |                            |
| STREET ADDRESS             | 7520 N.W. 50TH COURT   | 3.3 STREET ADDRESS                                    |                            |
| CITY-STATE-ZIP             | CORAL SPRINGS FL       | 3.4 CITY-STATE-ZIP                                    |                            |
| TITLE                      | AS                     | 4.1 TITLE                                             |                            |
| NAME                       | BECKER, DAVID          | 4.2 NAME                                              |                            |
| STREET ADDRESS             | 9000W. 87TH STREET     | 4.3 STREET ADDRESS                                    |                            |
| CITY-STATE-ZIP             | SHAWNEE MISSION KS     | 4.4 CITY-STATE-ZIP                                    |                            |
| TITLE                      | VP                     | 5.1 TITLE                                             | Vice President / Treasurer |
| NAME                       | STEER, ROBERT          | 5.2 NAME                                              |                            |
| STREET ADDRESS             | 9000W 67TH ST          | 5.3 STREET ADDRESS                                    |                            |
| CITY-STATE-ZIP             | SHAWNEE MISSION KS     | 5.4 CITY-STATE-ZIP                                    |                            |
| TITLE                      | S                      | 6.1 TITLE                                             |                            |
| NAME                       | TUTUN, MARSHALL L      | 6.2 NAME                                              |                            |
| STREET ADDRESS             | ONE POST OFFICE SQUARE | 6.3 STREET ADDRESS                                    |                            |
| CITY-STATE-ZIP             | BOSTON MA              | 6.4 CITY-STATE-ZIP                                    |                            |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Steer

3/30/99

(913) 676-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Steer

4/27/2000

Signed:

David Becker

David Becker

4-27-01

(913) 676-8800