

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandria B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P30815** (5)

1. Corporation Name

KING OCEAN CENTRAL AMERICA S.A.



Principal Place of Business

**7570 NW 14 STREET
MIAMI FL 33126**

Mailing Address

**7570 NW 14 STREET
MIAMI FL 33126**

3. Date Incorporated or Qualified

08/20/1990

3a. Date of Last Report

03/21/1995

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0195338

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**PATTERSON, GEORGE E., JR.
7570 N.W. 14 STREET
MIAMI FL 33126**

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Registered Agent (Print Name and Title)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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STREET ADDRESS

CITY-STATE-ZIP

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CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

**PD
CALDERON, HECTOR
7160 S.W. 133 ST.
MIAMI FL**

☐ DELETE

**V
DE MIRANDA, ANIBAL E.
4721 N.W. 7 ST. #204
MIAMI FL**

☐ DELETE

**S
PATTERSON, GEORGE E.
8285 S.W. 54 AVE.
MIAMI FL**

☐ DELETE

**T
PERDOMO, CARLOS
13470 S.W. 25 ST.
MIAMI FL**

☐ DELETE

**D
GOMEZ, JOSSY DA COSTA
SCHOTTEGATVEG DOST #168
CURACAO, NETHERLANDS**

☐ DELETE

**D
MANSUR, LUIS
DRIVENSTRAAT #10
ORANJESTAD, ARUBA**

☐ DELETE

13.

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-STATE-ZIP

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-STATE-ZIP

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

SIGNATURE: *Hector Calderon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HECTOR CALDERON

JANUARY 23, 1996 591-7595

CR2E034 (12/95)