

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/20/1990

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

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 PERDOMO, CARLOS

82

Street Address (P.O. Box Number is Not Acceptable)

10115 N. W. 9 Street Circle

83

84

City Miami

FL

85

Zip Code 33172

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 of officer or director of registered agent and this is applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D MANSUR, LUIS
DRIVENSTRAAT #10
ORANJESTAD, ARUBA

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐

Change

☐

Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐

Change

☐

Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐

Change

☐

Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐

Change

☐

Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐

Change

☐

Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐

Change

☐

Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:



CR2E034 (10/97)