

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000037116 (9)

1. Corporation Name

SHIP IMPORT & EXPORT, INC.



Principal Place of Business

Mailing Address

**1074 S W 131ST PLACE COURT
SUITE 702
MIAMI FL 33184
US**

**1074 S W 131ST PLACE COURT
SUITE 702
MIAMI FL 33184
US**

2. Principal Place of Business

2a. Mailing Address

21 1074 S W 131ST PLACE CT

26 1074 S W 131ST PLACE CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 MIAMI FLORIDA

28 MIAMI FLORIDA

Zip

Country

Zip

Country

24 33184

25 DADE

29 33184

30 DADE

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JOHN M MACDANIEL PA
TWO S BISCAYNE BLVD
ONE BISCAYNE TOWER #2975
MIAMI FL 33131**

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 typewritten in ink, or stamped, or otherwise made permanent

NOTE: Registered Agent Signature is printed after recording

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE
NAME **BENAVIDE, OSCAR D**
STREET ADDRESS **1074 S W 131ST PLAE COURT**
CITY-ST-ZIP **MIAMI SPRINGS FL**

1 ☒ Change ☐ Addition
11 TITLE
12 NAME
13 STREET ADDRESS **1074 S W. 131ST PLACE COURT**
14 CITY-ST-ZIP **MIAMI, FLORIDA 33184**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2 ☐ Change ☐ Addition
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3 ☐ Change ☐ Addition
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4 ☐ Change ☐ Addition
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5 ☐ Change ☐ Addition
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6 ☐ Change ☐ Addition
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.15.1996

(305) 551-2028

Daytime Phone #

CR2E034 (12/95)