2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 20, 2000 8:00 am Secretary of State DOCUMENT # **P94000060969** 1. Entity Name SEABOARD MARINE OF FLORIDA, INC. 03-20-2000 90047 013 ***150.00 Mailing Address Principal Place of Business 8050 N.W. 79TH AVENUE 8050 N.W. 79TH AVENUE MIAMI FL 33166-2154 MIAMI FL 33166 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0526653 Not Applicable \$8.75 Additional Zìp Country Zip Country 5. Certificate of Status Desired Fee.Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change TITLE ☐ Delete TITLE NAME BRESKY, H.H. NAME STREET ADDRESS STREET ADDRESS 200 BOYLSTON STREET CITY-ST-ZIP CITY-ST-ZIP CHESTNUT HILL MA 02167 Vice President ☐ Addition **X**1 Change ☐ Delete TITLE TITLE RODRIGUES, J.E. NAME STREET ADDRESS 9000 W. 67TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SHAWNEE MISSION KS 66201 Change Addition TITLE Delete TITLE NAME STEER, ROBERT NAME STREET ADDRESS STREET ADDRESS 9000 W 67TH ST CITY-ST-ZIP CITY-ST-ZIP SHAWNEE MISSION KS noitibbA 🛣 President Change X Delete TITLE TITLE John Lynch NAME BRESKY, H.H. NAME 8050 N.W. 79th Avenue STREET ADDRESS 200 BOYLSTON STREET STREET ADDRESS Miami, FL 33166 CITY-ST-ZIE CITY-ST-ZIP **CHESTNUT HILL MA 02167** ☐ Change Addition ☐ Delete TITLE TITLE NAME TUTUN, MARSHALL L NAME STREET ADDRESS STREET ADDRESS ONE POST OFFICE SQUARE CITY-ST-ZIP CITY-ST-ZIP BOSTON MA 02109 Change ☐ Addition AS ☐ Delete TITLE TITLE BECKER, DAVID M NAME NAME

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-\$T-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9000 W. 67TH STREET

SHAWNEE MISSION KS 66201

Robert L. Steer

3-7-00

913-676-8800