

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000092745

FILED
Apr 17, 2009
Secretary of State

Entity Name: ROBBIE'S SHIPPING AGENCY AND PORT SERVICES, INC.

Current Principal Place of Business:

7281 SHRIMP ROAD
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2208 - STOCK ISLAND
KEY WEST, FL 33045

New Mailing Address:

7281 SHRIMP ROAD - STOCK ISLAND
KEY WEST, FL 33045

FEI Number: 65-0652624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RECKWERDT, ROBERT ERNST
7281 SHRIMP ROAD
STOCK ISLAND-KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

RECKWERDT, ROBERT ERNST
7281 SHRIMP ROAD
KEY WEST, FL 33040 US

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: _____

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RECKWERDT, ROBERT ERNST
Address: 7281 SHRIMP ROAD
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: RECKWERDT, MICHAEL
Address: 7281 SHRIMP ROAD
City-St-Zip: KEY WEST, FL 33040

Title: SEC () Delete
Name: RECKWERDT, JONATHAN
Address: 7281 SHRIMP ROAD
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL RECKWERDT

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date