FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT #
1. Corporation Name
P96000059813
SEA BRIDGE SHIPPING, INC.

Principal Place of Business
6776 SW 64 ST.
Miami, FL 33143

Mailing Address
6776 SW 64 ST.
Miami, FL 33143.

3. Date Incorporated or Qualified: July 17, 1996
3a. Date of Last Report:

2. Principal Place of Business
21 3300 NW N. River Dr.
Suite, Apt. #, etc. 22
City & State 23 Miami, FL.
Zip 24 33142 Country 25 USA.

2a. Mailing Address
26 3300 NW N River Dr
Suite, Apt. #, etc. 27
City & State 28 Miami, FL
Zip 29 33142 Country 30 USA.

4. FEI Number: 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
MONTE K. RASSNER, ESQ.
7000 SW 62 Ave. #PH-B.
South Miami, FL 33143.

10. Name and Address of New Registered Agent
81 Name: NOEL GREGORY Silberberg
82 Street Address (P.O. Box Number is Not Acceptable): 3300 NW N. River Dr.
83
84 City: Miami FL 85 Zip Code: 33142

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: Noel Gregory Silberberg (NOTE: Registered Agent signature required when reinstating) DATE: April 29, 1997
Signature (typed or printed name of registered agent and title if applicable)

12. OFFICERS AND DIRECTORS

TITLE	P/D.	☐ DELETE
NAME	ROBERT E. GRIFFITHS	
STREET ADDRESS	8365 SW 131 ST.	
CITY-ST-ZIP	MIAMI, FL 33156.	
TITLE	D.	☒ DELETE
NAME	JOY GRIFFITHS	
STREET ADDRESS	6776 SW 64 ST.	
CITY-ST-ZIP	MIAMI, FL 33156	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D.	☒ Change ☐ Addition
1.2 NAME	ROBERT E. GRIFFITHS	
1.3 STREET ADDRESS	8365 SW 131 ST.	
1.4 CITY-ST-ZIP	MIAMI, FL 33156.	
2.1 TITLE	S/T/D.	☐ Change ☒ Addition
2.2 NAME	NOEL GREGORY Silberberg	
2.3 STREET ADDRESS	3300 NW N. RIVER DR.	
2.4 CITY-ST-ZIP	MIAMI, FL 33142	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I do 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: ROBERT E. GRIFFITHS. P/D. 4/29/97. 305-232-6518
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #