Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

□No

Not Applicable

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28 Zip

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

DOCUMENT # P97000041572

1. Corporation Name FLORIDA MARINE TERMINAL, INC.

Mailing Address Principal Place of Business P O BOX 013309 P O BOX 013309 MIAMI FL 33101-3309 MIAMI FL 33101-3309

Country

25

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90136 030 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

Trust Fund Contribution

Personal Property Tax.

Election Campaign Financing

8. This corporation owes the current year Intangible

05/07/1997

65-0749361

4. FEI Number

24	25	29	30			Pe	ersonal Pro	oerty Tax.		∐ Yes	L No
•	9. Name and Add	dress of Current Registers	d Agent			10. N	ame and A	ddress of Nev	w Registered	Agent	
ZAPETIS, KARENN 1717 N. BAYSIDE DR. #3538 3 MIAMI FL 33132					81 Name ZAPENS KAREN 82 Street Address (P.Q. Box Number is Not Acceptable) 83 A SHE & DAY 2856						
						_					
4				ŧ I	City	IAM,	Landa de la		FL	85 Zip C	132
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. am familiar with any accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE Signature-roped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.	organisment typed or printed it	OFFICERS AND DIRECTO		13.				HANGES TO	OFFICERS AI	ND DIRECTO	RS IN 12
TITLE	DP5		DELETE	1.1 TITLE	İ	ALLE		CAT	-12	Change	Addition
NAME	ZAPETIS, KAREN	l		1.2 NAME	- 1			_			
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CITY-ST-ZIP	MIAMI FL 33132			1.4 CITY-ST-2	ZIP	SAA	DIRM	(AllFe	MAIA	92123	
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NAME				2.2 NAME	-						
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NAME				3.2 NAME	l						
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CITY-ST-ZIP				4.4 CITY-ST-	ZIP	,					- D &ddillon
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CITY-ST-ZIP		attender of the state of the st	deno net quelific (il	6.4 CITY-ST-		Lin Coation 4:	10.07/2\/:\	Elorida Statuta	e I further co	rtify that the in	formation
14. I hereby of indicated	cerniy that the information this annual report	ation supplied with this filing or supplemental annual rep	ort is true and accurate	te and that r	ny signa	ature shall ha	ve the sam	e legal effect a	is if made und	ler oath; that I	am an

Country

30

officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: