## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000081271 (3)

GREEN REEFERS (USA), INC.

Principal Place of Business Mail

4600 OCEAN BEACH BLVD., STE. 505 GOCOA BEACH FL 32931

SIGNATURE:

Mailing Address

4600 OCEAN BEACH BLVD., STE. 505 COCOA BEACH FL 32931

## FILED Jan 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

				09/18/1997		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3468944	Not Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite,			5. Certificate of Status Desired	\$8.75 Additional	
22	27			5. Certificate of Status Desiled	Fee Required	
City & Stat	City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
23	28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current	nt year Intangible	
24	25	29 3	0	·	Yes 🗌 No	
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
PI	NINSULA REGISTERED AGENTS.	INC	81 Name			
200 S. BISCAYNE BLVD., STE. #4874 MIAMI FL 33131-2398			20 0:	82. Street Address (P.O. Box Number is Not Acceptable)		
			82 Street Address (P.O. Box Number is Not Acceptable)			
			83			
			"			
			84 City		85 Zip Code	
				<u>FL</u>		
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. Thereby accept the appointment as 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		Change 🔲 Addition	
NAME	ODFJELL, CARL F		1.2 NAME			
STREET ADDRESS	4600 OCEAN BEACH BLVD.,	STE. 505	1.3 STREET ADDRESS			
CITY - ST - ZIP	COCOA BEACH FL 32931		1.4 CITY - ST - ZIP			
TITLE	D	DELETE	2.1 TITLE		Change Addition	
NAME	MONSEN, ROBERT		2.2 NAME		- <b>-</b> -	
STREET ADDRESS	P.O. BOX 145, N-5032 MINDE		2.3 STREET ADDRESS			
	NORWAY					
CITY-ST-ZIP TITLE	D	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
	<b>.</b>	SLLLIE	1	L	7 Change TT Modition	
NAME	JACOBSEN, TRYM		3.2 NAME			
STREET ADDRESS	P.O. BOX 145, N-5032 MINDE		3.3 STREET ADDRESS			
CITY-ST-ZIP	NORWAY		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	L	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE	1	Change Addition	
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST- ZIP			
TITLE		☐ DELETE	6.1 TITLE	Γ-	Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		ļ	
	· · · · · · · · · · · · · · · · · · ·	γ				
CITY-ST-ZIP	certify that the information supplied up	this line does not que for the	6.4 CITY-ST-ZIP	n Section 119 07(3)(i) Florida Statutes I further contif	ny that the information	
14. I hereby certify that the information supplied with this along does not quarty 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 supplemental annual report in supplemental annual report is supplemental annual report of the corporation or the receiver of the corporation of th						
officer or director of the corporation or the receiver of the stree emboyie 1-dit of ket ute Block 12 or Block 13 if changed, or on an attachment with an addiese.			tute inis report as rec	quired by Chapter 607, Florida Statutes; and that my	name appears in	
בו משנה וב	or proces to it criminated or out all allact	nuchi Alm Ami and landi / / / //	N: 11 i			