2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 17, 2006 08:00 AM Secretary of State

ANNUAL REPURI				'	ت و با تسان		
DOCUMENT # P97000081596					Secret	tary of S	tate
1. Entity Name WORLD FUEL SERVICES COMPANY, INC.				<u> </u>			
	<u> </u>	<u> </u>	THE STATE OF THE S	}			
Principal Place 9800 NW 41		Mailing Address 9800 NW 41 ST.		}			
400		400		}			
MIAMI, FL 33	31/8 	MIAMI, FL 33178					
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DO NOT WRITE IN THIS SPA			CE	4. FEI Numb			Applied For Not Applicable
{					of Status Desired	□ \$8.7	5 Additional
{	6. Name and Address of Current Re	istered Agent	I	<u> </u>		Fee Re	edriusa
CT CORPO		na	NOT W	mme			
1200 S, PINE ISLAND RD.					NOT W		
PLANTATION, FL 33324			}	IN.	THIS SF	PACE	
	<u></u>	<u></u>	2	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE							···
<u> </u>	Signature, typed or printed name of registered agent and	itte if applicable. (NOTE, Registers	ed Agent signature require	d when reinstating)	,	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Fina Trust Fund Contribution.		.00 May Be ded to Fees	U00000(01/19/06	0387211 -80029-021	לת תבו
10.	OFFICERS AND DIF	RECTORS	1				
NAME .	DSTP DIAZ, ISABEL						
STREET ADDRESS	9800 NW 41 STREET		ł				
TITLE	MIAMI, FL 33178	e : 17	-{				
NAME			[
STREET ADDRESS CITY-ST-ZIP			1				
TITLE	<u> </u>		1				
NAME STREET ADDRESS							
CITY-ST-ZIP		and the second of the second o	1	DO	NOT W	RITE	
TITLE			1	IN	THIS SI	PACE	
STREET ADDRESS			I				
CITY-ST-ZIP			_				
TITLE NAME			1				
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I turther 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

sut 1/12/06

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