2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 13, 2007
Secretary of State

DOCUMENT# P99000004549

Entity Name: NAVETRANS CORP.

Current Principal Place of Business:

999 BRICKELL AVE SUITE 403
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

999 BRICKELL AVE SUITE 403
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0893052 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COPROLITE CORPORATION
ONE SOUTHEAST THIRD AVENUE
2130 SUNTRUST INTERNATIONAL CENTER
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: HAUBOLD, BERND
Address: 999 BRICKELL AVE, SUITE 403
City-St-Zip: MIAMI, FL 33131

Title: DV ( ) Delete
Name: GARAY, SERGIO L
Address: 999 BRICKELL AVE, SUITE 403
City-St-Zip: MIAMI, FL 33131

Title: AS ( ) Delete
Name: BLASS, STEPHEN A
Address: ONE SOUTHEAST THIRD AVE, SUITE 2130
City-St-Zip: MIAMI, FL 33131

Title: AS ( ) Delete
Name: FRANKEL, MELVIN F
Address: ONE SOUTHEAST THIRD AVE, SUITE 2130
City-St-Zip: MIAMI, FL 33131

Title: AVPT ( ) Delete
Name: PARDO, JUAN R
Address: 999 BRICKELL AVE, SUITE 403
City-St-Zip: MIAMI, FL 33131

Title: VFIN ( ) Delete
Name: PARDO, JUAN R
Address: 999 BRICKELL AVE, SUITE 403
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: HAUBOLD, BERND
Address: 999 BRICKELL AVE, SUITE 403
City-St-Zip: MIAMI, FL 33131

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

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

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

Title: DAVT (X) Change ( ) Addition
Name: PARDO, JUAN R
Address: 999 BRICKELL AVE, SUITE 403
City-St-Zip: MIAMI, FL 33131

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: STEPHEN A. BLASS AS 06/13/2007

Electronic Signature of Signing Officer or Director — Date