

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002445

FILED
Mar 08, 2007
Secretary of State

Entity Name: MAJESTIC TERMINAL SERVICES, INC.

Current Principal Place of Business:

13820 THOMAS IMESON AVE., STE. 26
JACKSONVILLE, FL 32218

New Principal Place of Business:

13824 THOMAS IMESON AVE., STE. 26
JACKSONVILLE, FL 32218

Current Mailing Address:

PMB 114
900 MERIDIAN E STE #19
MILTON, WA 98354

New Mailing Address:

FEI Number: 91-2018453 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CELLA, BRIAN D
13820 THOMAS IMESON AVE., STE. 26
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

CELLA, BRIAN D
13824 THOMAS IMESON AVE., STE. 26
JACKSONVILLE, FL 32218 US

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:

03/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: CELLA, BRIAN D
Address: 13820 THOMAS IMESON AVE., STE. 26
City-St-Zip: JACKSONVILLE, FL 32218

Title: S () Delete
Name: ANDERSON, DENNIS
Address: 161 VIA TISDELLE
City-St-Zip: ORANGE PARK, FL 32073

Title: VP () Delete
Name: ANDERSON, THERESA M
Address: 5421 124TH AVE E
City-St-Zip: EDGEWOOD, WA 98372 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN CELLA

PRES

03/08/2007

Electronic Signature of Signing Officer or Director

Date