

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Durise 100 North Mani Str Providence, RI 02903-13. 401 222 36

PROFIT CORPORATION ANNUAL REPORT FOR THE VEAD 2005

Filing Period: January 1 - M. (FORM MUST BE TYPED OR PRIN		g Fee: \$50.00	TOR THE TEAT		<u> </u>	
1. Corporate ID No.	2 Name of Corporation		 			
104988	World Fuel Serv	ices, Inc.				
3 Street Address Principal Business ()	4L St	- #400	Miani	State F.	3317	
5 Business Phone No. 1 408 8041 5 State of Incorporation TEXAS			6 SIC Code			
Brief Description of the Character of JET FUEL RESELLER.	f Business Conducted in k	thode Island	<u> </u>			
8. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) □ FILL IN S	PACES REFORE LISTNA	2 ATTACHMENTS	
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Dischard Name Charles Charles				, an inconvictor.		
9100 nw	415	4 #400	Street Address 9800 hW) 41 St	#400	
Secretary Name	state F C	33178	mami	State	3317	
Street Address	bu D	iaz_	Treasurer Name	XI Dic	è2	
9700 N	<u>W 41</u>	44W	9800 nw	415+	#400	
9. NAMES AND ADDRESSES	State T	*33 7 <i>8</i> s: ("x" box for att	Miami	State F L	33178	
Mi Chall	Clem	enti	Director Name	SPACES BEFORE USI	NG ATTACHMENTS	
9700 hw	41 5+	#400	Street Address			
Mami	F.	3317	Cuy	State	Ζφ	
Director Name			Director Name	•	••••••	
Street Address	·		Street Address		<u></u>	
City	State	Zip	City	State	Zιμ	
10. SHARES AUTHORIZED (AUTHORIZED SHARES	"X" BOX FOR ATTA	CHMENT) [11. SHARES ISSUED (".	X" BOX FOR ATTACH	MENT)	
Number of Shares	Juss/Series	Par Value	Number of Shaves	Class/Series	Par Value	
1,000 COMM \$1.00 PAR VAL	UE	-	1,000	Common	- 1.00	
This report must be significant	gned in ink by eithe	r the President, Vice Pre	esident, Secretary, Assistant	Secretary Treasurer I	Receiver or Trustee	
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				\wedge		
1 1001011	##	(B) (B) (B)	Under penalty, of perju	iry, I declare and affirm th	at I have examined this repor	

FOR SECRETARY OF STATE USE ONLY

including any accompanying schedules and statements, and that all statement contained herein are true and correct.

Tale of Officer

Form 630 Rev. 12/03



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Divisie 100 North Main Stre

Providence, RI 02903-13, 401.222.30

PROFIT CORPORATION A Filing Period: January 1 · March 1 · (FORM MUST BE TYPED OR PRINTED IN BLACK)	ANNUAL REPORT	FOR THE YE	AR200)4
1. Corporate II) No 2. Name of Corp				
3. Street Address Principal Business Office	Services, Inc.		10.00	
9800 NW 41 St	- #400	miami	State	33178
4. Business Phone No (305) 428-11	5 State of Incorporation TEXAS			6 SIC Code 0
7. Brief Description of the Character of Business Conduc JET FUEL RESELLER.	ned in Rhode Island			
8. NAMES AND ADDRESSES OF THE OFFI	CERS: ("X" BOX FOR ATTA		N SPACES BEFORE USIN	IG ATTACHMENTS
Michael Clum	enti	Vice President Name	Gne co	
Groo NW 41	S+ #400	Street Adress 4700 M	1W 41 St	#400
miami sant	²¹⁹ 33171	mami	State FL	²¹⁹ 331)8
	ìL	Treasurer Name Jal	al Diaz	2
9800 NW 41St	+400	Sircei Address 9Y00 N	U 41 St	#400
State State	²¹⁰ 331X	mami	State	^{zip} 331)8
ior Name	ctors: <u>("x" box for at</u> i	Director Name	IN SPACES BEFORE US	ING ATTACHMENTS
THE WANTED	S+ \\ 400	Street Address		
Miami state Fi	3311/	City	State	Zip
Director Name		Director Name	••••••••••••	••••••••••••••••••••••••••••••••
Street Address		Street Address		
City State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR AUTHORIZED SHARES	ATTACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTAC	HMENT)
Number of Shares (Jass/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM \$1.00 PAR VALUE		1,000	Comma	0 1.00
This report must be signed in ink b	y either the President, Vice P	resident, Secretary, Assis	tant Secretary, Treasurer	, Receiver or Trustee
Under penalty of perjury, 1 declare and affirm that 1 have examined this repo				

FOR SECRETARY OF STATE USE ONLY

including any accompanying squedules and statements, and that all statemen contained herein age true and convect. Signature of Officer Print or Type Name of Officer Title of Officer

Corporations Divisio

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

100 North Main Street, Providence, RI 02903-133 401-222 304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003



Ferm 630 12/02

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 2. Name of Corporation 1. Corporate 1D No. 104988 World Fuel Services, Inc. Koyal 5. State of Incorporation **TEXAS** Jet FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE OFFICERS (*x* BOX FOR ATTACHMENT) MYVICHAC binu ana Blud FILL IN SPACES BEFORE USING ATTACHMENTS MES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) -kyman Clement Ainciana Blud tinuana Blud Street Address Street Address Ziρ State State Zip City 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES Par Value Number of Shares Par Value Number of Shares Class/Series 1,000 COMM \$1.00 PAR VALUE

his report mu	test be signed in ink by either the President, V	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, an
File Date:	<u>2/3/03</u>	that all statements contained therein are true and correct.
Check No.:	341147	Signature of Officer 1 Sabe 1 Diaz Dale
By:	DE STATE USE ONLY	Title of Officer The of Officer The of Officer

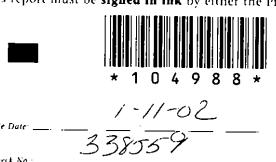
-₹\$≥ 5



Edward S. Inman, III, Secretary of Sta Corporations Divisio 100 North Main Street, Providence, RI 02903-133 401-222-304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR __2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 104988 World Fuel Services, Inc. 3 Street Address Principal Business Office 700 S. Royal Poinciana BIVD miami Springs FL 33166 4. Business Phone No. 5 State of Incorporation 6 SIC Code (305) 884-2001 **TEXAS** 7. Brief Description of the Character of Business Conducted in Rhode Island fuel of jet 3au 5 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Clementi Michael +layman Edward Street Address 700 S. Royal Poinciana Blud Royal Poinciana Blud 700 3. Isabel Diaz Royal Poinciana Blud 700 5 Royal Ponciana Blud Spnngs State 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Clementi Hayman michael Edward Street Address Koyal Poinciana Blud Royal Poinciana Blud Director Name Street Address Street Address State City State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Number of Shares Class/Series Par Value 1.000 COMM \$1.00 PAR VALUE 1,000 common 1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

 Under penalty of perjury, I declare and affirm that I have examined 	
this report, including any accompanying schedules and statements.	аn
that all statements contained herein are true and correct.	
lached	
<u> </u>	
Signature of Officer Date	
_ Isabel Diaz	
Print or Type Name of Officer	
Composate Diretary	





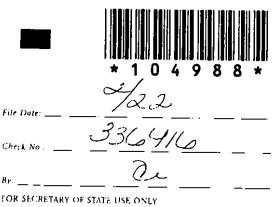
Corporations Divi. 100 North Main Street, Providence, RI 02903-1 401-222-3

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001



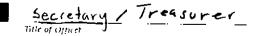
Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) L. Carparate ID No. 2. Name of Corporation 104988 World Fuel Services, Inc. 3 Street Address Principal Business Office City Zip 700 S. Royal Poinciana Blvd. (suite 800) Miami Springs FL 33166 5. State of Incorporation 6. SIC Code (305)884-2001 TEXAS 0 7. Brief Description of the Character of Business Conducted in Rhode Island Sales of Jet Fuel 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Michael Clementi Mark Grieco Street Address Street Address 700 S. Royal Poinciana Blvd. (suite 800) 700 S. Royal Poinciana Blvd. (suite 800) Z_{ip} City Miami Springs 33166 Miami Springs 33166 Secretary Name Treasurer Name Isabel Diaz Isabel Diaz Street Addréss Street Address 700 S. Royal Poinciana Blvd. (suite 800) 700 S. Royal Poinciana Blvd. (suite 800) Miami Springs FL 33166 Miami Springs FL33166 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Michael Clementi Edward Hayman Street Address Street Address 700 S. Royal Poinciana Blvd. (suite 800) 700 S. Royal Poinciana Blvd. (suite 800) Miami Springs FL 33166 Miami Springs FL33166 Director Name Director Name Street Address Street Address State City State Zip 10. SHARES AUTHORIZED ("X" BOX FOR AITACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUED SHARES Number of Shares Class/Senes Par Value Number of Shares Class/Series Par Volue 1,000 COMM \$1.00 PAR VAL 1,000

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

| OI/17/01 |
| Signature of Officer | Date |
| Tsabel Diaz



Front or Type Name of Officer

James R. Langevin, Secretary of S Corporations Divi. 100 North Main Street, Providence, RI 02903-1 401-222-3

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM	MUST	BE,	TYPED	ΙN	BLACK)
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1. Corporate ID No.

2. Name of Corporation

104988

World Fuel Services, Inc.

3 Street Address Principal Business Office

State

Zip

700 S, ROYAL POINCIANA BLVD.

MIAMI, SPRINGS, s. State of incorporation FLORIDA

6. SIC Code

4 Rusiness Phone No. (305) 884-2001

TEXAS

7 Brief Description of the Character of Business Conducted in Rhode Island

sales of jet fuel

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

MICHAEL CLEMENTI

Street Address

700 S. ROYAL POINCIANA BLVD., SUITE 800

FLORIDA 33166 MIAMI SPRINGS

Secretary Name ISABEL DIAZ

Street Address

700 S. ROYAL POINCIANA BLVD. SUITE 800

MIAMI SPRINGS FLORIDA 33166 Vice President Name

FD HAYMAN

Street Address

700 S. RUYAL PUINCIANA BLVD. SUITE 800 State

MIAMI SPRINGS FLORIDA 33166

Treasurer Name

ISABEL DIAZ

Street Address

Director Name

700 S. ROYAL POINCIANA BLVD. SUITE 800

MIAMI SPRINGS, FLORIDA 33166

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

MICHAEL CLEMENTI

Street Address

700 S. ROYAL POINCIANA BLVD. SUITE 200

MLAMI SPRINGS, FLORIDA Director Name

Street Address

City

State

ED HAYMAN _ Street Address

700 S. ROYAL POINCIANA BLVD. SUITE 800

MIAMI SPRINGS, FLORIDA

Street Address

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Volue

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

1,000

100

1,000 COMM \$1.00 PAR VAL

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste



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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. 5abel

