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PORT EVERGLADES FRANCHISE APPLICATION

An application will not be deemed complete and ready for processing until all required documents and fees are received.

A separate application must be filed for each type of franchise applied for.

FRANCHISE TYPE

CHECK ONE

☒

STEAMSHIP AGENT

☐

STEVEDORE

☐

CARGO HANDLER

☐

TUGBOAT & TOWING

☐

VESSEL BUNKERING

☐

VESSEL OILY WASTE REMOVAL

☐

VESSEL SANITARY WASTE WATER REMOVAL

☐

MARINE TERMINAL SECURITY

☐

MARINE TERMINAL SECURITY

FIREARMS CARRYING SECURITY PERSONNEL

NON-FIREARMS CARRYING SECURITY PERSONNEL

Note: Applicant is the legal entity applying for the franchise. If the Applicant is granted the franchise, it will be the named franchisee. All information contained in this application shall apply only to the Applicant, and not to any parent, affiliate, or subsidiary entities.

Applicant's

Name Christian Bay Shipping Co. dba Fillette, Green Shipping Services (USA) Corp

(Name as it appears on the certificate of incorporation, charter, or other legal documentation as applicable, evidencing the legal formation of the Applicant)

Applicant's Business Address 5225 Katy Freeway, Suite 690 Houston, Texas 77007

Phone # (713) 453-5895 Ext 105 E-mail address fgssadmin @ fillettegreen.com

Fax #: (713) 453-7658

Name of the person authorized to bind the Applicant (Person's signature must appear on Page 13.)

Name Cherina Thomas

Title Chief Operating Officer

Business Address 5225 Katy Freeway, Suite 690 Houston, Texas 77095

Phone # (832) 368-3313 E-mail address cherina.thomas @ fillettegreen.com

Fax #: (713) 453-7658

Provide the Name and Contact Information of Applicant's Representative to whom questions about this application are to be directed (if different from the person authorized to bind the Applicant):

Representative's Name Cherina Thomas

Representative's Title Chief Operating Officer

Representative's Business Address 5225 Katy Freeway, Suite 690 Houston, Texas 77007

Representative's Phone # 832) 368-3313

Representative's E-mail address cherina.thomas @ fillettegreen.com

Representative's Fax # (713) 453-7658

PLEASE COMPLETE THIS APPLICATION AND LABEL ALL REQUIRED BACKUP DOCUMENTATION TO CLEARLY IDENTIFY THE SECTION OF THE APPLICATION TO WHICH THE DOCUMENTATION APPLIES (I.E...., SECTION A, B, C, etc.).

Section A

1. List the name(s) of Applicant's officers, including, CEO, COO, CFO, director(s), member(s), partner(s), shareholder(s), principal(s), employee(s), agents, and local representative(s) active in the management of the Applicant.

Officers:

Title Chief Executive Officer

First Name Derrick Middle Name N

Last Name Thomas

Business Street Address 5225 Katy Freeway, Suite 690

City, State, Zip Code Houston, Texas 77007

Phone Number (713) 899-7046 Fax Number (713) 453-7658

Email Address derrick.thomas @ fillettegreen.com.

Title Chief Operating Officer

First Name Cherina Middle Name M

Last Name Thomas

Business Street Address 5225 Katy Freeway, Suite 690

City, State, Zip Code Houston, Texas 77007

Phone Number (832) 368-3313 Fax Number (713) 453-7658

Email Address cherina.thomas @ fillettegreen.com.

Title Port Operations Representative

First Name Joey Middle Name _____

Last Name Gilley

Business Street Address 2109 E. Palm Ave. Suite 206

City, State, Zip Code Tampa, Florida 33605

Phone Number (813) 348-1481 Fax Number ()

Email Address ptev @ fillettegreen.com.

Title _____

First Name _____ Middle Name _____

Last Name _____

Business Street Address _____

City, State, Zip Code _____

Phone Number () Fax Number ()

Email Address _____ @ _____.

Attach additional sheets if necessary.

2. RESUMES: Provide a resume for each officer, director, member, partner, shareholder, principal, employee, agent, and local representative(s) active in the management of the Applicant, as listed above.

Derrick N. Thomas
Houston, Texas
713.899.7046 (mobile)
derrick@fillettegreen.com

EXECUTIVE LEADERSHIP • CLIENT RELATIONS • MARKETING • TEAM BUILDING

SUMMARY

Executive leader with over 30 years' experience in the vessel agency industry offering excellent interpersonal skills with strong client relationships. A highly motivated leader with strong maritime sales and marketing background, possessing excellent communication skills, and the ability to implement innovative maritime solutions.

EDUCATION

1992 – 1994, Southern University of New Orleans (Business Admin. Studies)

CORE COMPETENCIES

- | | | |
|-------------------------------|-----------------------------------|-----------------------------------|
| • Strategic Planning | • Interpersonal Skills | • Client Relationships |
| • Business Development | • Innovation | • Maritime Solutions |
| • Merger & Acquisitions | • Problem Solving/Detail oriented | • Quality Driven |
| • Team Building & Development | • Vessel Operations | • Written / Verbal Communications |

EXPERIENCE

President, Houston, Texas

Feb 1995 - Present

Fillette, Green Shipping Services (USA) Corp

Develop strategic plans to advance the company's mission and objectives and promote revenue, profitability, and growth. Oversee company operations to insure production efficiency, quality service, and cost-effective management of resources. Identify acquisition and merger opportunities and direct implementation activities. Responsible for facilitation and approving company operational procedures, policies, and best practice standards. Review activity reports and financial statements to determine progress and status in attaining objectives and revise objectives and plans in accordance with current conditions. Promote the company through strategic solicitation efforts, which includes extensive domestic and international travel to visit existing and potential clients.

Operations/Boarding Agent, Houston, Texas

Dec 1985 – Jan 1995

Fillette, Green Shipping Services (USA) Corp

Responsible for on-board vessel attendance consisting of conducting entrance and clearance procedures with government authorities; coordinated United States Coast Guard compliance inspections; monitored crew attendance; calculated and submitted performer disbursement accounts to clients; arranged crew medical evacuations, negotiated solutions to address operational problems; assisted vessel captains with personnel problems with crew members; coordinated emergency vessel repairs; selection of reputable shore labor and technicians to carry out vessel repairs; collection and delivery of spare parts; timely, efficient and economic coordination of ordering and delivery of stores, provisions, fresh water and bunkers (fueling); assisted crew joining or repatriating; and repairs to navigation equipment. Additional responsibility included any delays and delivery or completion of any vessel related duties.

CHERINA THOMAS

HOUSTON, TEXAS
MOBILE: 832-368-3313

PROJECT MANAGEMENT / SOFTWARE INTEGRATION

Core competencies include:

Data Analysis and Troubleshooting Business Process Redesign Workflow Optimization Operational Effectiveness Proactive Leadership & Management	Implement Communication Strategies Relationship Building & Management System Automation Quality Integration Liaison TJC Regulations
Technology Expertise	Governance Planning
Project Management	Team Building & Development
Strategic Planning & Implementation	Energetic & Motivated
Application System Administration	RFP and Vendor Selection
Strong Communication & Interpersonal Skills Clinical Information Systems	Knowledge of Healthcare Processes Integrated Health Delivery Networks Process Improvement

	PROFESSIONAL EXPERIENCE	
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Professional Highlights

Thirty years of information system experience; Nineteen years of healthcare related experience; Excellent interpersonal, communication and leadership skills; Electronic Medical Record; Business Process Redesign; Software Integration.

Employment History

Fillette Green Shipping Services 2014 – Present
Chief Operating Officer

Participates in developing and implementing strategic plans that supports the organization's vision and goals; translates the strategic plan to staff to ensure support; and modifies the plan in response to changing internal and external factors. Collaborate with President and other leadership team members in setting policies and determining strategies to meet or exceed revenue, profit, and cash flow commitments to the company. Analyzes current and future trends and needs and accurately assesses functional responsibilities competitive strengths and vulnerabilities. Identifies opportunities for value creation.

Harris County Hospital District 2010 - 2014
Director of Quality Integration

Provided quality measure reporting including implementing an automated Quality Measure Scorecard along with performance improvement plan and data dictionary documentation templates; Implemented software tools to establish efficient Quality processes; Served as IT Liaison for Quality Management department to ensure that all regulatory and workflow requirements were met; Responsible for data analysis, data mapping and trending of Quality indicators (Patient Safety, Core Measures, Infection Prevention); Generated clinical reports to meet regulatory requirements; Responsible for monitoring Quality Data Services functions and processes; Provided oversight for the collection of all Quality data requirements; Responsible for creating surveys for Quality and provided survey results and analysis; SharePoint development and ongoing maintenance for Quality Management Services; Project Management; Business Process Redesign; Best Practice Workflow Management; Software Implementations; **Process Improvement:** Workflow optimization; Identified solutions that were aligned with the goals of the organization; Technology automation; Operational effectiveness; **Governance:** Organized and facilitated governance committees; Implemented Communication strategies; Application **Support:** System Integration; Application System Administrators; Communication Plan; Change Management; Escalation procedures; Application Technical and Functional Knowledge transfer; **Clinical applications:** Epic Applications; Incident Reporting System; Infection Surveillance System; and Core Measures Reporting.

Harris County Hospital District 2002 - 2010
Information Systems Clinical Manager

Provided professional/technical leadership for HCHD Clinical areas. Monitored project prioritization based on global business perspective. Monitored resource allocation and availability; Managed and coordinated support of clinical applications; Organized and coordinated application user groups/governance activities; Participated in business process redesign; Provided decision-making data used for project approvals; Project planning; Managed application support; Monitored staff performance; RFP and vendor selection; procurement; vendor software; software contract reviews; Develop Clinical Application Deployment Strategies; Clinical Application Upgrades / Implementations; Project Request / SOW development; Recruiting; Project Tracking.

	EDUCATION	
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Master of Information Systems

University of Phoenix, Phoenix AZ

Bachelor of Science Information Technology

University of Phoenix, Phoenix AZ.

Xavier University, Cincinnati OH

Louisiana State University, Baton Rouge LA

Professional Training

Harris County Leadership Institute (LEAD)

Project Management Professional Certification

Joseph Gilley

Mulberry, Florida

joey.gilley@fillettegreen.com

Summary

Vessel Agency Operations and Management with 7+ years of experience in importing and exporting cargos from the U.S.

Professional History

Fillette, Green Shipping Services (USA) Corp.

March 2019 – Present

- Responsible for preparing important and time sensitive paperwork for inward and outward clearance of foreign flagged vessels to discharge and/or load cargo.
- Coordination with Authorities and all respective parties involved to ensure timely commencement of operations
- Primary support for customer inquiries
- Sending daily operations updates

American Marine Agencies Inc.

August 2014 – January 2020

- Responsible for preparing important and time sensitive paperwork for inward and outward clearance of foreign flagged vessels to discharge and/or load cargo.
- Coordination with Authorities and all respective parties involved to ensure timely commencement of operations
- Primary support for customer inquiries
- Sending daily operations updates
- Creating and organizing invoices
- Sending accounts

Skills:

- Strong attention to detail
- Project Management
- Excellent Time Management
- Deadline Driven
- Microsoft Office

Section B

1. Place checkmark to describe the Applicant:
() Sole Proprietorship (x) Corporation () Partnership () Joint Venture () Limited Liability Company
2. Provide copies of the documents filed at the time the Applicant was formed including Articles of Incorporation (if a corporation); Articles of Organization (if an LLC); or Certificate of Limited Partnership or Limited Liability Limited Partnership (if a partnership). If the Applicant was not formed in the State of Florida, provide a copy of the documents demonstrating that the Applicant is authorized to conduct business in the State of Florida.

Section C

1. Has there been any change in the ownership of the Applicant within the last five (5) years? (e.g., any transfer of interest to another party)
Yes x No If "Yes," please provide details in the space provided. Attach additional sheets if necessary.
2. Has there been any name change of the Applicant or has the Applicant operated under a different name within the last five (5) years?
Yes No x If "Yes," please provide details in the space provided, including: Prior name(s) and Date of name change(s) filed with the State of Florida's Division of Corporations or other applicable state agency. Attach additional sheets if necessary.
3. Has there been any change in the officers, directors, executives, partners, shareholders, or members of the Applicant within the past five (5) years?
Yes x No If "Yes," please provide details in the space provided, including:
Prior officers, directors, executives, partners, shareholders, members
Name(s) Robert Pundsack, Christian Pundsack
New officers, directors, executives, partners, shareholders, members
Name(s) Derrick Thomas, Cherina Thomas, Jessica Thomas
Also supply documentation evidencing the changes including resolution or minutes appointing new officers, list of new principals with titles and contact information, and effective date of changes. Attach additional sheets if necessary.

Section D

Provide copies of all fictitious name registrations filed by the Applicant with the State of Florida's Division of Corporations or other State agencies. If none, indicate "None" .

M43462

ARTICLES OF INCORPORATION

OF

CHRISTIAN BAY SHIPPING CO.

FILED

1986 DEC 17 PM 3:54

SECRETARY OF STATE
MIAMI, FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, does hereby adopt the following Articles of Incorporation:

Article 1. Name. The name of the Corporation is:
CHRISTIAN BAY SHIPPING CO.

Article 2. Duration. The duration of the Corporation is perpetual.

Article 3. Purpose. The general purposes for which the Corporation is organized are the following:

1) To engage in the business of acting as steamship agents; ship brokers; vessel managers; marine insurance managers, agents and brokers; stevedores and all service necessary to maritime shipping.

2) To enter into any business lawful under the laws of the State of Florida, either for its own account, or for the account of others, as agents, and either as agent or principal, to enter upon or engage in any kind of business of any nature whatsoever, in which corporations organized under the Florida General Corporation Act may engage; and to the extent not prohibited thereby to enter upon and engage in any kind of business of any nature whatsoever in any other state of the United States of America, and foreign nation, and any territory of any country to the extent permitted by law or such other state, nation or territory. No other purpose limits this general purpose in any way.

3) To do such other things as are incidental to the purposes of the Corporation or necessary or desirable in order to accomplish them.

Article 4. Capital Stock. The aggregate number of shares which the Corporation is authorized to issue is 60 shares of common stock. Such shares shall be of a single class and shall have no par value.

Article 5. Initial Registered Office and Agent. The street address of the initial Registered Office of the Corporation is 901 S.E. 17th Street, Suite 208, Fort Lauderdale, FL 33316, and the name of its initial Registered Agent at that address is DANIEL D. DOUGLASS.

Article 6. Initial Board of Directors. The number of Directors constituting the initial Board of Directors is one (1). The number of Directors may be increased or decreased from time to time in accordance with the Bylaws but shall never be less than one. The name and address of each initial Director of the Corporation is as follows:

Daniel D. Douglass
901 S.E. 17th Street, Suite 208
Fort Lauderdale, FL 33316

Article 7. Incorporators. The name and address of each Incorporator is as follows:

Daniel D. Douglass
901 S.E. 17th Street, Suite 208
Fort Lauderdale, FL 33316

Article 8. Amendment. The Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment to them, and any right conferred upon the Shareholders is subject to this reservation.

Article 9. Indemnification. The Corporation shall indemnify each Officer and Director, including former Officers and Directors, to the full extent permitted by law.

Article 10. Preemptive Rights. Each Shareholder of the Corporation shall have the right to purchase, subscribe for, or receive a right or rights to purchase or subscribe for, at the price for which it is offered to others, that Shareholder's pro rata portion of the following:

A. Any stock of any class that the Corporation may issue or sell, whether or not exchangeable for any stock of the Corporation of any class or classes, and whether or not of unissued shares authorized by the Articles of Incorporation as originally filed or by any amendment thereof or out of shares of stock of the Corporation acquired by it after the issuance thereof, and whether issued for cash or other consideration; or

B. Any obligation that the Corporation may issue or sell which is convertible into or exchangeable for any stock of the Corporation of any class or classes, or to which is attached or pertinent any warrant or warrants or other instruments conferring on the holder the right to subscribe for or purchase from the Corporation any shares of its stock of any class or classes.

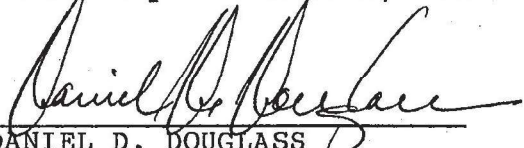
This right shall be deemed waived by any Shareholder who does not exercise it and pay for the shares preempted within thirty (30) days after receipt of written notice from the

Corporation stating the price, terms and conditions of the issue of shares and inviting the Shareholder to exercise this preemptive right. This right may also be waived by a written waiver signed by the Shareholder.

Article 11. Bylaws. The power to adopt, alter, amend and repeal the Bylaws shall be vested in the Board of Directors, but all alterations, amendments and repeals of the Bylaws must be approved by a majority of the Shareholders.

Article 12. Commencement of Corporate Existence. In accordance with Section 607.167, Florida Statutes, the date when corporate existence shall commence is the date of subscription and acknowledgement of these Articles of Incorporation.

IN WITNESS WHEREOF, the undersigned has signed these Articles of Incorporation on this 15th day of December, 1986.


DANIEL D. DOUGLASS

STATE OF FLORIDA)
COUNTY OF BROWARD)

Before me personally appeared DANIEL D. DOUGLASS to me well known and known to me to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged to and before me that he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this 15th day of December, 1986.


NOTARY PUBLIC
State of Florida at Large

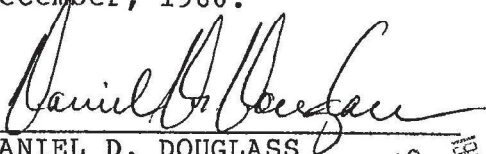
My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP JUNE 30, 1990
BONDED THRU GENERAL INS. UND.

ACCEPTANCE BY REGISTERED AGENT

The undersigned hereby accepts the appointment as
Registered Agent of CHRISTIAN BAY SHIPPING CO., which is contained
in the foregoing Articles of Incorporation.

Dated this 15th day of December, 1986.



DANIEL D. DOUGLASS
Registered Agent

FILED
1986 DEC 17 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

January 18, 1991

Allen von Spiegelfeld
Fowler, White
501 East Kennedy Blvd.
Tampa, Florida 33601

Re: Document Number M43462

Dear Mr. Spiegelfeld:

This will acknowledge receipt of your Amendment to the Articles of Incorporation for CHRISTIAN BAY SHIPPING CO., a Florida corporation, which was filed on January 14, 1991. We have received your remittance totaling \$87.50. Enclosed please find your certificate(s).

Should you have any questions regarding this matter please telephone (904) 487-6050, the Amendment Filing Section.

KELLEY SHANK
Division of Corporations



I certify that the attached is a true and correct copy of the Articles of Amendment, filed on January 14, 1991, to Articles of Incorporation for CHRISTIAN BAY SHIPPING CO., a Florida corporation, as shown by the records of this office.

The document number of this corporation is M43462.

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
18th day of January, 1991.



CR2EO22 (6-88)

A handwritten signature in cursive script, reading "Jim Smith".

Jim Smith
Secretary of State

AMENDMENT TO ARTICLES OF INCORPORATION
OF

CHRISTIAN BAY SHIPPING CO.

WHEREAS, the Articles of Incorporation of CHRISTIAN BAY SHIPPING CO. were filed with and approved by the Secretary of State of the State of Florida on the 17th day of December, 1988, and

WHEREAS, it is the intention of the directors and the stockholders of CHRISTIAN BAY SHIPPING CO. that the Articles of Incorporation of CHRISTIAN BAY SHIPPING CO. be amended, in accordance with the proposed amendment hereinafter set forth; and

WHEREAS, the proposed amendment was approved and adopted by the directors of CHRISTIAN BAY SHIPPING CO., at a Special Meeting of the Board of Directors and Stockholders, held on November 28, 1990, pursuant to the provisions of Florida Statutes, Section 607.0820; and

WHEREAS, the proposed amendment was approved and adopted by the stockholders comprising the only voting group of stockholders of CHRISTIAN BAY SHIPPING CO., pursuant to the provisions of Florida Statutes, Section 607.1003, on the 28th day of November, 1990; and

WHEREAS, the approval of the Secretary of State of the State of Florida of the proposed amendment hereinafter set forth is hereby requested.

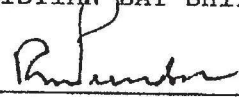
FILED
1991 JAN 14 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOW, THEREFORE, the Articles of Incorporation of CHRISTIAN BAY SHIPPING CO. are hereby amended, by deleting in its entirety the present Article 4. and by substituting therefor the following, to-wit:

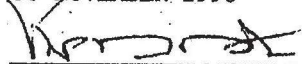
"Article 4. Capital Stock. The total number of shares of capital stock authorized to be issued by the corporation shall be 1,000 shares having no par value. Each of the said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of the stockholders. All or any part of said capital stock may be paid for in cash, in property or in labor or services actually performed for the corporation and valued at a fair valuation to be fixed by the Board of Directors at a meeting called for such purpose. All stock when issued shall be paid for and shall be nonassessable."

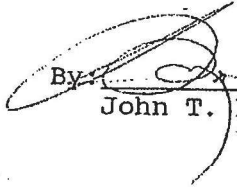
IN WITNESS WHEREOF, this Amendment to Articles of Incorporation is hereby executed on behalf of CHRISTIAN BAY SHIPPING CO., by its President and Secretary this 30 day of November, 1990.

CHRISTIAN BAY SHIPPING CO.

By: 
Robert N. Pundsack, President

SWORN TO BEFORE ME THIS
30 NOVEMBER 1990


NOTARY PUBLIC - STATE OF FLORIDA

By: 
John T. Moore, Secretary

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. MAR. 30, 1994
BONDED THRU GENERAL INS. UND.

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 30
day of November, 1990, by ROBERT N. PUNDSACK and JOHN T. MOORE,
President and Secretary, respectively, of CHRISTIAN BAY SHIPPING
CO., a Florida corporation, on behalf of the corporation.



Notary Public

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. MAR. 30, 1994
BONDED THRU GENERAL INS. UND.

docs\006



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation

CHRISTIAN BAY SHIPPING CO.

Filing Information

Document Number	M43462
FEI/EIN Number	59-2747995
Date Filed	12/17/1986
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	03/05/2025
Event Effective Date	11/16/2022

Principal Address

5225 Katy Freeway
Suite 690
Houston, TX 77007

Changed: 03/31/2020

Mailing Address

5225 Katy Freeway
Suite 690
Houston, TX 77007

Changed: 02/19/2019

Registered Agent Name & Address

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202

Name Changed: 11/16/2022

Address Changed: 02/18/2023

Officer/Director Detail

Name & Address

Title President

THOMAS, DERRICK N
5225 Katy Freeway
Suite 690
Houston, TX 77007

Title VP, COO, Treasurer

Thomas, Cherina
5225 Katy Freeway
Suite 690
Houston, TX 77007

Title Secretary

Edwards, Jessica
5225 Katy Freeway
Suite 690
Houston, TX 77007

Annual Reports

Report Year	Filed Date
2023	05/19/2023
2024	06/08/2024
2025	03/06/2025

Document Images

03/06/2025 -- ANNUAL REPORT	View image in PDF format
03/05/2025 -- Amendment	View image in PDF format
06/08/2024 -- ANNUAL REPORT	View image in PDF format
05/19/2023 -- ANNUAL REPORT	View image in PDF format
11/16/2022 -- REINSTATEMENT	View image in PDF format
08/04/2021 -- ANNUAL REPORT	View image in PDF format
03/31/2020 -- ANNUAL REPORT	View image in PDF format
02/19/2019 -- ANNUAL REPORT	View image in PDF format
04/30/2018 -- ANNUAL REPORT	View image in PDF format
06/26/2017 -- Reg. Agent Change	View image in PDF format
03/06/2017 -- AMENDED ANNUAL REPORT	View image in PDF format
03/01/2017 -- ANNUAL REPORT	View image in PDF format
01/27/2016 -- ANNUAL REPORT	View image in PDF format
03/17/2015 -- ANNUAL REPORT	View image in PDF format
02/14/2014 -- ANNUAL REPORT	View image in PDF format
02/08/2013 -- ANNUAL REPORT	View image in PDF format
01/25/2012 -- ANNUAL REPORT	View image in PDF format
01/21/2011 -- ANNUAL REPORT	View image in PDF format
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06/12/2009 -- ANNUAL REPORT	View image in PDF format
03/13/2009 -- ANNUAL REPORT	View image in PDF format

02/27/2008 -- ANNUAL REPORT	View image in PDF format
05/09/2007 -- ANNUAL REPORT	View image in PDF format
04/18/2007 -- ANNUAL REPORT	View image in PDF format
03/06/2007 -- ANNUAL REPORT	View image in PDF format
12/12/2006 -- ANNUAL REPORT	View image in PDF format
04/21/2006 -- ANNUAL REPORT	View image in PDF format
03/29/2005 -- ANNUAL REPORT	View image in PDF format
03/29/2004 -- ANNUAL REPORT	View image in PDF format
10/02/2003 -- REINSTATEMENT	View image in PDF format
02/12/2002 -- ANNUAL REPORT	View image in PDF format
01/31/2001 -- ANNUAL REPORT	View image in PDF format
01/31/2000 -- ANNUAL REPORT	View image in PDF format
04/13/1999 -- ANNUAL REPORT	View image in PDF format
05/05/1998 -- ANNUAL REPORT	View image in PDF format
04/11/1997 -- ANNUAL REPORT	View image in PDF format
07/08/1996 -- ANNUAL REPORT	View image in PDF format
03/08/1995 -- ANNUAL REPORT	View image in PDF format

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M43462

Entity Name: CHRISTIAN BAY SHIPPING CO.

Current Principal Place of Business:

5225 KATY FREEWAY
SUITE 690
HOUSTON, TX 77007

Current Mailing Address:

5225 KATY FREEWAY
SUITE 690
HOUSTON, TX 77007 US

FEI Number: 59-2747995

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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: CHERINA THOMAS

03/06/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP, COO, TREASURER
Name	THOMAS, DERRICK N	Name	THOMAS, CHERINA
Address	5225 KATY FREEWAY SUITE 690	Address	5225 KATY FREEWAY SUITE 690
City-State-Zip:	HOUSTON TX 77007	City-State-Zip:	HOUSTON TX 77007
Title	SECRETARY		
Name	EDWARDS, JESSICA		
Address	5225 KATY FREEWAY SUITE 690		
City-State-Zip:	HOUSTON TX 77007		

I hereby 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 all other like empowered.

SIGNATURE: CHERINA THOMAS

**CHIEF OPERATING
OFFICER**

03/06/2025

Electronic Signature of Signing Officer/Director Detail

Date



[Previous on List](#) . [Next on List](#) . [Return to List](#) .

Fictitious Name Owner Search

No Filing History

Submit

Fictitious Name Detail

Fictitious Name

FILLETTE GREEN SHIPPING SERVICES (USA) CORP.

Filing Information

Registration Number G21000132060
Status ACTIVE
Filed Date 09/30/2021
Expiration Date 12/31/2026
Current Owners 1
County MULTIPLE
Total Pages 1
Events Filed NONE
FEI/EIN Number NONE

Mailing Address

5225 KATY FREEWAY SUITE 690
HOUSTON, TX 77007

Owner Information

CHRISTIAN BAY SHIPPING CO.
5225 KATY FREEWAY, SUITE 690
HOUSTON, TX 77007
FEI/EIN Number: 59-2747995
Document Number: M43462

Document Images

[09/30/2021 -- Fictitious Name Filing](#)

View image in PDF format

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Fictitious Name Owner Search

No Filing History

Submit



I certify that the attached is a true and correct copy of the Articles of Amendment, filed on January 14, 1991, to Articles of Incorporation for CHRISTIAN BAY SHIPPING CO., a Florida corporation, as shown by the records of this office.

The document number of this corporation is M43462.

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
18th day of January, 1991.



CR2EO22 (6-88)

A handwritten signature in cursive script, reading "Jim Smith".

Jim Smith
Secretary of State

State of Florida

Department of State

I certify from the records of this office that CHRISTIAN BAY SHIPPING CO. is a corporation organized under the laws of the State of Florida, filed on December 17, 1986.

The document number of this corporation is M43462.

I further certify that said corporation has paid all fees due this office through December 31, 2025, that its most recent annual report/uniform business report was filed on March 6, 2025, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Nineteenth day of August,
2025*




Secretary of State

Tracking Number: 1179779294CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

Section E

1. Has the Applicant acquired another business entity within the last five (5) years?
Yes ___ No x If "Yes," please provide the full legal name of any business entity which the Applicant acquired during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application.
If none, indicate "None" _____.

2. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the acquired firm's officers, managers, employees and/or the acquired firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary.

N/A

3. Has the Applicant been acquired by another business entity within the last five (5) years?
Yes ___ No x If "Yes," provide the full legal name of any business entity which acquired the Applicant during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application.
If none, indicate "None" _____.

4. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the parent firm's officers, managers, employees and/or the parent firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary.

N/A

Section F - See Page 33

Provide the Applicant's previous business history, including length of time in the same or similar business activities as planned at Port Everglades.

Section G - See Page 33

1. Provide a list of the Applicant's current managerial employees, including supervisors, superintendents, and forepersons.
2. List the previous work history/experience of the Applicant's current managerial employees, including their active involvement in seaports and length of time in the same or similar business activities as planned at Port Everglades.

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. **Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).**

If none, state "None" _____.

Seaport Port Canaveral Number of Years Operating at this Seaport - 33

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
Carnival Cruise Line	28 years
NOSAT	10 years
SMT	15 years
Martin Marietta	18 years
Canadian Steamship Lines	15 years
Schuyler Lines	2 years

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. **Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).**

If none, state "None" _____.

Seaport Port of Tampa Number of Years Operating at this Seaport - 38

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
BBC Chartering	25 years
World Direct Shipping	11 years
Clipper Bulk AS	7 years
Conagra/Gavilon	30 years
Fugro	15 years
Ismas	30 years
Sea Tankers	15 years
United Bulk Carriers	12 years
PMI/Polsteam	22 years
SMT	20 years

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. **Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).**

If none, state "None" _____.

Seaport Port Everglades Number of Years Operating at this Seaport 38

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
Chiquita/Great White Fleet	25 years
EXMAR Shipmanagement	5 years
Western Geco	15 years
World Direct Shipping	10 years

Section I

1. Provide a description of all past (within the last five (5) years) and pending litigation and legal claims where the Applicant is a named party, whether in the State of Florida or in another jurisdiction, involving allegations that Applicant has violated or otherwise failed to comply with environmental laws, rules, or regulations or committed a public entity crime as defined by Chapter 287, Florida Statutes, or theft-related crime such as fraud, bribery, smuggling, embezzlement or misappropriation of funds or acts of moral turpitude, meaning conduct or acts that tend to degrade persons in society or ridicule public morals.

The description must include all of the following:

- a) The case title and docket number
- b) The name and location of the court before which it is pending or was heard
- c) The identification of all parties to the litigation
- d) General nature of all claims being made

If none, indicate "None" None.

2. Indicate whether in the last five (5) years the Applicant or an officer, director, executive, partner, or a shareholder, employee or agent who is or was (during the time period in which the illegal conduct or activity took place) active in the management of the Applicant was charged, indicted, found guilty or convicted of illegal conduct or activity (with or without an adjudication of guilt) as a result of a jury verdict, nonjury trial, entry of a plea of guilty or nolo contendere where the illegal conduct or activity (1) is considered to be a public entity crime as defined by Chapter 287, Florida Statutes, as amended from time to time, or (2) is customarily considered to be a white-collar crime or theft-related crime such as fraud, smuggling, bribery, embezzlement, or misappropriation of funds, etc. or (3) results in a felony conviction where the crime is directly related to the business activities for which the franchise is sought.

Yes No X

If you responded "Yes," please provide all of the following information for each indictment, charge, or conviction:

- a) A description of the case style and docket number
- b) The nature of the charge or indictment
- c) Date of the charge or indictment
- d) Location of the court before which the proceeding is pending or was heard
- e) The disposition (e.g., convicted, acquitted, dismissed, etc.)
- f) Any sentence imposed
- g) Any evidence which the County (in its discretion) may determine that the Applicant and/or person found guilty or convicted of illegal conduct or activity has conducted itself, himself or herself in a manner as to warrant the granting or renewal of the franchise.

Section J

The Applicant must provide a current certificate(s) of insurance. Franchise insurance requirements are determined by Broward County's Risk Management Division and are contained in the Port Everglades Tariff No. 12 as amended, revised or reissued from time to time. The Port Everglades Tariff is contained in the Broward County Administrative Code, Chapter 42, and is available for inspection on line at: <http://www.porteverglades.net/development/tariff>.

See attached



CERTIFICATE OF LIABILITY INSURANCE

7/24/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER License # 4682 Houston, TX-Hub International Insurance Services 10777 Westheimer Road Suite 300 Houston, TX 77042	CONTACT NAME: Cynthia Gilchrest PHONE (A/C, No, Ext): (713) 425-6616 FAX (A/C, No): (713) 978-6799 E-MAIL ADDRESS: cynthia.gilchrest@hubinternational.com
INSURED Christian Bay Shipping Co. dba Fillette, Green Shipping Services (USA) Corp. 5225 Katy Freeway Suite 690 Houston, TX 77007	INSURER(S) AFFORDING COVERAGE INSURER A: Swiss Re Corporate Solutions America Insurance Corporation INSURER B: Beazley Insurance Company INSURER C: Manufacturers Alliance Insurance Company INSURER D: American Longshore Mutual Assn INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:			DDM0000100-06	6/19/2025	6/19/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			DDC1000035-04	6/19/2025	6/19/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	☒ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$ 25,000			V37845250101	6/19/2025	6/19/2026	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
C	☒ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☒ Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A	202501-15-42-94-3	6/19/2025	6/19/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Workers Comp (USL&H)			ALMA-061224-034326-02	6/19/2025	6/19/2026	Limit 1,000,000
D	Maritime Empl Liab			ALMA-061224-034326-02	6/19/2025	6/19/2026	Limit 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

\$4M EXCESS BREAKDOWN:

50% Lead - Policy# ML2025MEE10410 - Effective 6/19/2025-6/19/2026 - New York Marine and General Insurance Company

50% Follow - Policy# V37845250101 - Effective 6/19/2025-6/29/2026 - Beazley Insurance Company

Professional Liability

Carrier: TT Club Mutual Insurance Limited (TTI)

Policy Term: 06/01/2025 to 05/31/2026

SEE ATTACHED ACORD 101

CERTIFICATE HOLDER

CANCELLATION

Broward County
Attn: Port Everglades Department
Business Administration Division
1800 Eller Dr
Fort Lauderdale, FL 33316

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



ADDITIONAL REMARKS SCHEDULE

AGENCY Houston, TX-Hub International Insurance Services	License # 4682	NAMED INSURED Christian Bay Shipping Co. dba Fillette, Green Shipping Services (USA) Corp. 5225 Katy Freeway Suite 690 Houston, TX 77007
POLICY NUMBER SEE PAGE 1		
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:

Policy Number: 0222/TTI
Limit of Liability: \$1,000,000
Deductible each occurrence: \$10,000

The Commercial General Liability policy includes:

- In Rem Endorsement - Form MGL00003
- Blanket Additional Insured - Form MGL00043
- Blanket Waiver of Subrogation - Form MGL00043
- Primary/Non-Contributory - Form MGL00045

The Business Auto policy includes:

- Blanket Additional Insured - Primary and Non-Contributory with Other Insurance Form SP 14 534 08 17
- Waiver of Subrogation endorsement CA 0444 10 13

The Workers Compensation policy includes:

- Waiver of our Right to Recovery from Others Endorsement - WC99 03 06
- Alternate Employer Endorsement WC 00 03 01 A

Umbrella follows form subject to policy terms, conditions and exclusions – Bumbershoot Form 2/20/2018

Swiss Re Corporate Solutions America Insurance Corporation

ADDITIONAL INSURED(S) & WAIVER OF SUBROGATION (BLANKET)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

MARINE GENERAL LIABILITY COVERAGE FORM

It is agreed that this Policy will include, as an Additional Insured, any person or organization, but only to the extent that you are obligated by a "written contract" to include them as Additional Insured(s) and only with respect to work and/or operations performed by you or on your behalf.

The inclusion of an Additional Insured does not in any way extend the type of coverage afforded by the Policy, nor does it increase the limits of liability under the Policy.

It is further agreed that we waive any right of recovery we may have against any person or organization because of payments we make for "bodily injury" or "property damage" arising out of "your work" with that person or organization, but only to the extent that you are obligated by a "written contract" to provide such waiver of rights of recovery and only with respect to "your work" or to your premises or the premises you use.

All other terms and conditions of this policy shall remain unchanged.

This endorsement forms a part of the policy to which attached, effective on the inception date of the policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to the preparation of the policy.)

Policy Number:

Endorsement Effective Date:

Named Insured:

Swiss Re Corporate Solutions America Insurance Corporation

[Endorsement No.]

ADDITIONAL INSURED BY CONTRACT, AGREEMENT OR PERMIT

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

SECTION II – COVERED AUTOS LIABILITY COVERAGE, paragraph **A.1 – Who Is An Insured** is amended to include the following as an insured:

- d. Any person or organization with respect to the operation, maintenance or use of a covered "auto," provided that you and such person or organization have agreed in a written contract, agreement, or permit issued to you by governmental or public authority, to add such person, or organization, or governmental or public authority to this policy as an "insured."

However, such person or organization is an **"insured"**:

- (1) Only with respect to the operation, maintenance or use of a covered "auto";
- (2) Only for "bodily injury" or "property damage" caused by an "accident" which takes place after you executed the written contract or agreement, or the permit has been issued to you; and
- (3) Only for the duration of that contract, agreement or permit

All other terms and conditions of this policy shall remain unchanged.

This endorsement forms a part of the policy to which attached, effective on the inception date of the policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to the preparation of the policy.)

Policy Number:

Endorsement Effective Date:

Named Insured:

TT Club Mutual Insurance Ltd

From the London agent of the Managers
International Transport Intermediaries Management
Company Ltd.
90 Fenchurch Street
London EC3M 4ST
Tel: 020-7338-0150
Email: ITIM@thomasmiller.com

CERTIFICATE OF ENTRY 0222 /TTI

In the name of:

**Christian Bay Shipping Company dba: Fillette,
Green Shipping Services
5225 Katy Freeway, Suite 690
Houston, TX 77007
U.S.A.**

We confirm that you are insured by TT Club Mutual Insurance Limited ("TTI") but are not a member but are registered as a senior member of International Transport Intermediaries Club Ltd ("ITIC") and as such you are a member of ITIC.

This insurance is subject to the 2024 Rules of International Transport Intermediaries Club Ltd ("ITIC").

All ITIC Rules 2024 (Rules) under Parts 1, 5, 6, 7, 8, 9, 10 and 11 apply to this certificate of entry. Specific Rules in Parts 2, 3, and 4 apply as noted in the terms and conditions to this certificate of entry.

ITIC Rules applying to this certificate are amended to the extent, and only to the extent, necessary to give effect to the fact that the certificate represents an insurance contract between you and TTI which is reinsured by ITIC. Without limitation to the generality of this, TTI is bound under the reinsurance contract to follow any exercise of discretions reserved to ITIC Managers and Directors under the Rules.

Your period of insurance is:

1st June, 2025 to 31st May, 2026 and your account year commences 0.00 G.M.T. 1st June, 2025

Your insurance broker, subject to Rule 31, is noted as :

**HUB International Insurance Services
10777 Westheimer, Suite 300
Houston, Texas
77042-3454
United States of America**

This certificate of entry supersedes any previous certificates of entry and endorsements relating to insurance provided to you. Words and phrases used in this certificate of entry and any subsequent endorsements shall have the same meaning as those given to them in Rule 34, unless inconsistent with the subject of context. Your attention is drawn to Rule 1.1 which lists those sections of the Insurance Act 2015 which are excluded from your cover.

TERMS AND CONDITIONS

1.0 Nature of Cover

Your insurance under Part 2 of the Rules, professional indemnity insurances, is on a claims made policy as described in Rule 3.1.

Your insurance under Part 3 of the Rules, cargo and related liabilities, is also on a claims made policy as described in Rule 9.1.

2.0 Insured Risks and Services

2.1 When you provide the following services, either directly or through your subcontractors:

ship agent

you are insured (unless otherwise stated) under Part 2 of the Rules, professional indemnity insurances, for:

liability for negligent performance	Rule 2.1 (a)
liability for fraudulent acts of employees	Rule 2.1 (b)
liability for libel, slander etc	Rule 2.1 (c)
liability for loss of documents	Rule 2.1 (d)
liability for breach of warranty of authority	Rule 2.1 (e)
liability as an unintentional principal	Rule 2.1 (f)
liability of principals attaching to agents	Rule 2.1 (g)
liability to authorities	Rule 2.1 (h)
damages	Rule 2.2
costs	Rule 2.3

subject to the exclusions and qualifications Rules 3 and 13

2.2 When you provide the services listed below, either directly or through your subcontractors, using as the main mode of transport that stated (and other modes if incidental) and within the geographical area also stated

<u>Services</u>	<u>Transport mode</u>	<u>Geographical area</u>
forwarding agent / AMS	not applicable	United States of America

you are insured (unless otherwise stated) under Part 3 of the Rules, cargo and related liabilities, for:

liability for physical loss of or damage to cargo	Rule 4	NOT INSURED
liability for delays and other financial losses	Rule 5	
third party liabilities	Rule 6	NOT INSURED
liabilities for fines, penalties and duty	Rule 7	
costs	Rule 8.1	

subject to the exclusions and qualifications Rules 9 and 13

2.3 Under Part 4 of the Rules, ancillary insurances, you are insured (unless otherwise stated) for:

additional legal expenses insurance and debt collection	Rule 10	ship agent services ONLY
discretionary insurance	Rule 11	all insured services
loss of commission	Rule 12	NOT INSURED
cash in transit/money	Rule 12	NOT INSURED
subject to the exclusions and qualifications	Rule 13	

3.0 Limits of liability

Subject to Rule 1.6:

- 3.1 Your general limit of liability each occurrence is: USD 1,000,000
- 3.2 Except that a special limit of liability each occurrence will apply to:
- (a) Claims under Rule 10 are also subject to the relevant provisions in other terms and conditions listed here in paragraph 5.0. USD 250,000
 - (b) Claims under Rule 5 and in total each account year: USD 100,000
 - (c) Claims under Rule 2.1 (a) in relation to Invoice Fraud: USD 250,000
 - but not exceeding in total each account year: USD 500,000

4.0 Deductibles

Subject to Rule 1.5:

- 4.1 Your general deductible each occurrence is: USD 10,000
- 4.2 Except that a special deductible each occurrence will apply to:
- (a) Costs paid under Rules 2.3.1 (a) and (b), 8.1 and 10 No deductible

5.0 Other terms and conditions

- (a) The minimum sum in dispute for cover to apply under Rule 10, additional legal expenses insurance and debt collection, is USD 3,500.
- (b) This insurance excludes any liability, loss, damage, costs and expenses in respect of which you are insured under a contract previously entered into with either Transport Intermediaries Mutual Insurance Association Ltd, or the Chartered & International Shipbrokers' P. & I. Club Ltd.
- (c) CLARIFICATION WORDING - The deliberate release of cargo without presentation of the relevant original bill of lading is a commercial risk taken by the agent or carrier and is not an error or omission that would be the subject of a professional indemnity insurance policy. You are not insured for claims made directly or indirectly by the holder of a bill of lading where cargo has been delivered without prior presentation of the relevant original bill of lading unless you can show that you reasonably believed the relevant original bill of lading had been presented and that the delivery was solely the result of a negligent act or omission.

- (d) Invoice Fraud means payment of any funds subject to an invoice or other demand to any incorrect party due to your failure to notice that:
- (i) the invoice or demand was issued or amended by a fraudulent party and/or
 - (ii) any payment instructions (received independently of the invoice or demand) advising of changes to bank or payment details were issued or amended by a fraudulent party.

6.0 Joint members

Subject to Rule 15 the following firms are noted as Joint Members:

- (a) and Branch offices at:
Tampa, Port Everglades,
Port Canaveral, West Palm Beach,
Port Manatee and Pensacola.
- (b) Lake Charles, Wilmington, Richmond,
Savannah, Stockton,
Baltimore.
- (c) Mobile, Gulfport, Pascagoula, New
Orleans,
Houston, Galveston, Beaumont,
Corpus Christi, Port Arthur,
Texas City, Freeport,
Point Comfort and Brownsville.

7.0 Claims notification

Subject to Part 6 of the Rules, all notifications of claims to be made to:

International Transport Intermediaries Management Company Ltd
90 Fenchurch Street
London EC3M 4ST
Tel: +44 (0)20 7338 0150
Email: ITIM@thomasmiller.com
For further information please go to our website at www.itic-insure.com and follow the link to Claims

8.0 Price

USD 27,000

Per Annum
Subject to Rules 20.1 and 20.2
Being 100% of the advance premium.

Please note that the price for the insurance does not include premium tax, stamp duty or any other charges, including bank charges. If applicable, these will be for your account.

9.0 Payment Terms

Payment must be made within 30 days of the debit note date unless otherwise agreed in writing by the London agent of the Managers of TT Club.

Signed for International Transport Intermediaries Management Co Ltd,
London agent of the Managers
of TT Club Mutual Insurance Ltd.

Date



Alistair Mactavish
Chief Underwriting Officer & Chief Operating Officer

29/05/2025

Section K

1. The Applicant must provide its most recent audited or reviewed financial statements prepared in accordance with generally accepted accounting principles, or other documents and information which demonstrate the Applicant's creditworthiness, financial responsibility, and resources, which the Port will consider in evaluating the Applicant's financial responsibility.

2. Has the Applicant or entity acquired by Applicant (discussed in Section E herein) sought relief under any provision of the Federal Bankruptcy Code or under any state insolvency law filed by or against it within the last five (5) year period?

Yes ___ No ☒

If "Yes," please provide the following information for each bankruptcy or insolvency proceeding:

- a) Date petition was filed or relief sought
- b) Title of case and docket number
- c) Name and address of court or agency
- d) Nature of judgment or relief
- e) Date entered

3. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for the business or property of the Applicant?

Yes ___ No ☒

If "Yes," please provide the following information for each appointment:

- a) Name of person appointed
- b) Date appointed
- c) Name and address of court
- d) Reason for appointment

4. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for any entity, business, or property acquired by the Applicant?

Yes ___ No ☒

If "Yes," please provide the following information for each appointment:

- a) Name of person appointed
- b) Date appointed
- c) Name and address of court
- d) Reason for appointment

Section L

List four (4) credit references for the Applicant, one of which must be a bank. Use this format:

Name of Reference: Hancock/Whitney Nature of Business: Business Banker
Contact Name: Stephanie Sparacino Title: Commercial Client Admin
Legal Business Street Address: 2510 14th
City, State, Zip Code: Gulfport, Gulfport, MS, 39501
Phone Number: (228)563-5696

Name of Reference: Bank of America Nature of Business: Business Banker
Contact Name: Patricia L. Walker Title: Vice President
Legal Business Street Address: 2600 W. Big Beaver Rd.,
City, State, Zip Code: Troy, MI 48084
Phone Number: (248)845-1892

Name of Reference: Port Everglades Pilots Nature of Business: Pilots
Contact Name: Lauren Nadel Title: Accounts Department
Legal Business Street Address: P.O. Box 13017
City, State, Zip Code: Port Everglades, FL 33316
Phone Number: (954)522-4491

Name of Reference: Seabulk Towing Nature of Business: Tugs
Contact Name: Jane Turner Title: Accounts Department
Legal Business Street Address: P.O. Box 123320
City, State, Zip Code: Dallas, TX. 75312-3320
Phone Number: (954)627-5209

Section M

1. Security: Pursuant to Port Everglades Tariff 12, Item 960, all Franchisees are required to furnish an Indemnity and Payment Bond or Irrevocable Letter of Credit drawn on a U.S. bank in a format and an amount not less than \$20,000 as required by Broward County Port Everglades Department.
2. Has the Applicant been denied a bond or letter of credit within the past five (5) years?
Yes___ No X___
If "Yes," please provide a summary explanation in the space provided of why the Applicant was denied. Use additional sheets if necessary.

Section N

1. Provide a list and description of all equipment currently owned and/or leased by the Applicant and intended to be used by the Applicant for the type of service(s) intended to be performed at Port Everglades including the age, type of equipment and model number. N/A
2. Identify the type of fuel used for each piece of equipment.
3. Indicate which equipment, if any, is to be domiciled at Port Everglades.
4. Will all equipment operators be employees of the Applicant, on the payroll of the Applicant, with wages, taxes, benefits, and insurance paid by the Applicant?
Yes___ No___
If "No," please explain in the space provided who will operate the equipment and pay wages, taxes, benefits, and insurance, if the franchise is granted. Use additional sheets if necessary.

Section O

Provide a copy of the Applicant's current Broward County Business Tax Receipt (formerly Occupational License).

Section P

1. Provide a copy of Applicant's safety program.
2. Provide a copy of Applicant's substance abuse policy.
3. Provide a copy of Applicant's employee job training program/policy.
4. Provide information regarding frequency of training.
5. Include equipment operator certificates, if any.



August 18, 2025

Broward County – Port Everglades Business Admin Div.
1850 Eller Drive, Suite 603
Fort Lauderdale, FL 33316
Attn: Bianca Alexander

RE: **Our Irrevocable Standby Letter of Credit No. SB20236**
Applicant: Christian Bay Shipping Co.
Amount: USD\$50,000.00

Ladies & Gentlemen:

As per the automatic renewal condition of this Letter of Credit, we confirm that it has renewed for an additional period. The expiration date is now February 25th, 2026.

Should you have any questions, you may call our Letter of Credit Operations Department at (504) 586-7301.

Very truly yours,

A handwritten signature in black ink, appearing to read "Stephanie Joyce", written over a horizontal line.

Stephanie Joyce
Hancock Whitney Bank
Letter of Credit Department

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025**Business Name:** FILLETTE GREEN SHIPPING SERVICES
USA CORP**Receipt #:** 322-2916
Business Type: BOAT REPAIR/MOBILE CAR DETAIL
(SHIPS AGENT)**Owner Name:** DERRICK THOMAS**Business Opened:** 11/03/1987**Business Location:** 2500 EISENHOWER BLVD 314
FT LAUDERDALE**State/County/Cert/Reg:****Exemption Code:****Business Phone:** 7134535895 EXT 105

Rooms

Seats

Employees

1

Machines

Professionals

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	0.00	0.00	8.25	0.00	25.00	66.25

Receipt Fee 33.00

Packing/Processing/Canning Employees 0.00

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS**THIS BECOMES A TAX RECEIPT****WHEN VALIDATED**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:DERRICK THOMAS
5225 KATY FWY STE 690
HOUSTON, TX 77007-2284**Receipt #** WWW-24-00293373
Paid 08/25/2025 66.25**2024 2025****BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT**

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025**Business Name:** FILLETTE GREEN SHIPPING SERVICES
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FT LAUDERDALE**State/County/Cert/Reg:****Exemption Code:****Business Phone:** 7134535895 EXT 105

Rooms

Seats

Employees

1

Machines

Professionals

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	0.00	0.00	8.25	0.00	25.00	66.25

Receipt # WWW-24-00293373
Paid 08/25/2025 66.25

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026**Business Name:** FILLETTE GREEN SHIPPING SERVICES
USA CORP**Receipt #:** 322-2916
Business Type: BOAT REPAIR/MOBILE CAR DETAIL
(SHIPS AGENT)**Owner Name:** DERRICK THOMAS**Business Opened:** 11/03/1987**Business Location:** 8201 PETERS RD STE 1000
FT LAUDERDALE**State/County/Cert/Reg:****Exemption Code:****Business Phone:** 7134535895 EXT 106

Rooms

Seats

Employees

1

Machines

Professionals

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	3.30	0.00	0.00	0.00	0.00	36.30

Receipt Fee 33.00

Packing/Processing/Canning Employees 0.00

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS**THIS BECOMES A TAX RECEIPT****WHEN VALIDATED**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:DERRICK THOMAS
5225 KATY FWY STE 690
HOUSTON, TX 77007-2284**Receipt #** WWW-24-00293373
Paid 08/25/2025 36.30**2025 2026****BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT**

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026**Business Name:** FILLETTE GREEN SHIPPING SERVICES
USA CORP**Receipt #:** 322-2916
Business Type: BOAT REPAIR/MOBILE CAR DETAIL
(SHIPS AGENT)**Owner Name:** DERRICK THOMAS**Business Opened:** 11/03/1987**Business Location:** 8201 PETERS RD STE 1000
FT LAUDERDALE**State/County/Cert/Reg:****Exemption Code:****Business Phone:** 7134535895 EXT 106

Rooms

Seats

Employees

1

Machines

Professionals

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	3.30	0.00	0.00	0.00	0.00	36.30

Receipt # WWW-24-00293373
Paid 08/25/2025 36.30

Section Q

1. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from any federal, state, or local environmental regulatory agencies?
Yes___ No_X__
2. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or civil penalties from the U.S. Coast Guard?
Yes___ No_X__
3. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from the Occupational Safety and Health Administration?
Yes___ No_X__

If you responded "Yes" to any of this section's questions 1, 2, or 3 above, please provide a detailed summary for each question containing the following information:

- a) Name and address of the agency issuing the citation or notice
- b) Date of the notice
- c) Nature of the violation
- d) Copies of the infraction notice(s) from the agency
- e) Disposition of case
- f) Amount of fines, if any
- g) Corrective action taken

Attach copies of all citations, notices of violations, warning notices, civil penalties and fines issued by local, state, and federal regulatory agencies, all related correspondence, and proof of payment of fines.

4. Provide a statement (and/or documentation) which describes the Applicant's commitment to environmental protection, environmental maintenance, and environmental enhancement in the Port.

Section R

Provide written evidence of Applicant's ability to promote and develop growth in the business activities, projects or facilities of Port Everglades through its provision of the services (i.e., stevedore, cargo handler or steamship agent) it seeks to perform at Port Everglades. For first-time applicants (stevedore, cargo handler and steamship agent), the written evidence must demonstrate Applicant's ability to attract and retain new business such that, Broward County may determine in its discretion that the franchise is in the best interests of the operation and promotion of the port and harbor facilities. The term "new business" is defined in Chapter 32, Part II of the Broward County Administrative Code as may be amended from time to time.



Established 1919

Fillette, Green Shipping Services (USA) Corp.

Vessel Agents

Telephone: (713) 453-5895 (24 Hours) • Fax: (713) 453-7658

Email: hou@fillettegreen.com

HOUSTON, TEXAS

Section F

Business History

Fillette Green Shipping has been operating as vessel agents in Port Everglades under current management since 1987. In 2015, Robert Pundsack became terminally ill and the company's succession plan was implemented in which Derrick Thomas assumed the majority of the company shares. Most regrettably, our beloved CEO Robert Pundsack passed away October 25, 2016.

Section G

Port Operations Management Team

Joey Gilley – Ports Operations – East Gulf Port – manages port operations for East Gulf Ports and acts as agents for Port Everglade's vessels. He is based in Tampa office.

Section N

Fillette Green Shipping acts in the capacity of vessel agents in Port Everglades and, as such maintains no equipment in the port.

Section O

Fillette Green Shipping is fully committed to environmental protection and supporting a greener environment. As agents, our ability to impact the environment is limited, however, we follow the leadership and guidelines of the port environmental requirements. Corporately, we are pursuing technologies to automate our manual processes and reduce energy and paper use as well as participate in toner cartridge and other similar office product recycling programs.

5225 Katy Freeway • Suite 690 • Houston, Texas 77007

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Association of Ship Brokers & Agents (US)



Certified Agent Company

This certifies that

Fillette Green Shipping Services (US)

has successfully complied with criteria for certification as per

Article XIII

Valid July 1, 2025 ~ June 30, 2026



Paul Paul
President

[Signature]

Fillette Green Shipping Services (USA) Corp Employee Handbook



Section 1 - Governing Principles of Employment

1-1 Introduction

For employees who are commencing employment with Fillette Green Shipping Services (USA) Corp ("Fillette Green Shipping Services (USA) Corp" or the "Company"), on behalf of Fillette Green Shipping Services (USA) Corp, let me extend a warm and sincere welcome.

For employees who have been with us, thanks for your past and continued service.

I extend my personal best wishes for success and happiness here at Fillette Green Shipping Services (USA) Corp. We understand that it is our employees who provide the services that our customers rely upon, and who will enable us to create new opportunities in the years to come.

Derrick N Thomas, President

1-5 Drug-Free and Alcohol-Free Workplace

To help ensure a safe, healthy and productive work environment for our employees and others, to protect Company property, and to ensure efficient operations, the Company has adopted a policy of maintaining a workplace free of drugs and alcohol. This policy applies to all employees and other individuals who perform work for the Company.

The unlawful or unauthorized use, abuse, solicitation, theft, possession, transfer, purchase, sale or distribution of controlled substances, drug paraphernalia or alcohol by an individual anywhere on Company premises, while on Company business (whether or not on Company premises) or while representing the Company, is strictly prohibited. Employees and other individuals who work for the Company also are prohibited from reporting to work or working while they are using or under the influence of alcohol or any controlled substances, which may impact an employee's ability to perform his or her job or otherwise pose safety concerns, except when the use is pursuant to a licensed medical practitioner's instructions and the licensed medical practitioner authorized the employee or individual to report to work. However, this does not extend any right to report to work under the influence of medical marijuana or to use medical marijuana as a defense to a positive drug test, to the extent an employee is subject to any drug testing requirement, to the extent permitted by and in accordance with applicable law. This restriction does not apply to responsible drinking of alcohol at business meetings and related social outings. Violation of this policy will result in disciplinary action, up to and including discharge.

The Company maintains a policy of non-discrimination and will endeavor to make reasonable accommodations to assist individuals recovering from substance and alcohol dependencies, and those who have a medical history which reflects treatment for substance abuse conditions. However, employees may not request an accommodation to avoid discipline for a policy violation. We encourage employees to seek assistance before their substance abuse or alcohol misuse renders them

unable to perform the essential functions of their jobs, or jeopardizes the health and safety of any Company employee, including themselves.

2-11 Employee Development Plan

In conjunction with his/her supervisor, each employee will annually create an employee development plan for the purpose of identifying development goals and specific activities associated with achieving those goals. All employees will be provided with the employee development plan form and associated instructions once each year. Dates for periodic review of the plan will be specified in the plan.

2-12 Training and Professional Development

The Company provides periodic training courses for qualified employees. In addition, eligible employees may be given the opportunity to attend training programs that will enable them to improve their skills and qualify for advancement. Advance approval by the COO is required before any course is taken. Reimbursement is paid upon successful completion of an approved course.

Membership in professional organizations wherein the employee receives benefits that can be directly applied to improving job performance will be reimbursed by the company providing the employee participates in the organization and receives prior authorization for the reimbursement from the COO.

Section 5 - General Standards of Conduct

5-14 Health and Safety

The health and safety of employees and others on Company property are of critical concern to Fillette Green Shipping Services (USA) Corp. The Company intends to comply with all health and safety laws applicable to our business. To this end, we must rely upon employees to ensure that work areas are kept safe and free of hazardous conditions. Employees are required to be conscientious about workplace safety, including proper operating methods, and recognize dangerous conditions or hazards. Any unsafe conditions or potential hazards should be reported to management immediately, even if the problem appears to be corrected. Any suspicion of a concealed danger present on the Company's premises, or in a product, facility, piece of equipment, process or business practice for which the Company is responsible should be brought to the attention of management immediately.

Periodically, the Company may issue rules and guidelines governing workplace safety and health. The Company may also issue rules and guidelines regarding the handling and disposal of hazardous substances and waste. All employees should familiarize themselves with these rules and guidelines, as strict compliance will be expected.

Any workplace injury, accident, or illness must be reported to the employee's Supervisor as soon as possible, regardless of the severity of the injury or accident.

Safety Program Requirements

Christian Bay Shipping Co

Exhibit 1
Page 51 of 67

Title	Program Requirements	Training Requirements
Access to Employee Exposure and Medical Records	• Identify what records must be maintained • Maintain employee's records confidentially • Ensure access to records by employees, as required • Inform employees of their rights, complete Access to Employee Exposure and Medical Records FORM, employees need access	REQUIRED TRAINING: • Access to Employee Exposure and Medical Records Employees must be informed of what records are kept, their location, and how to access them. Frequency: initial, annual
Accident Investigation and Reporting	• Determine who will investigate accidents, this may include supervisors, management, and employees • Determine accident and near miss reporting procedures • Inform employees of the work-related injuries and illness procedures and their rights to report • Complete accident report as needed, Accident, Incident, Near Miss Investigation Report FORM • Note additional state requirements for: AK, HI, WA	Available but not required training: • Accident investigation (Supervisor) • Accident Reporting
Back Safety in the Workplace	• Identify risk factors for back injury in the operations • Repetitive or prolonged activities • Awkward postures • Unusual size or weight objects • Implement any required controls to minimize or eliminate hazards	Available but not required training: • Back Safety • Back Care (Medical)
Blood and Body Fluids (Incidental) Exposure	• Identify Risk Situations	Available but not required training: • Blood and Body Fluids Safety Awareness

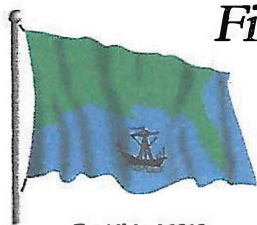
Christian Bay Shipping Co

SAFETY AND HEALTH POLICY STATEMENT

Safety and health in our company must be a part of every operation, and is every employee's responsibility.

We maintain a safety and health program conforming to the best practices of businesses in our industry. To be successful, such a program must embody the proper attitudes toward injury and illness prevention and requires cooperation in all safety and health matters between employees at all levels. Only through a cooperative effort can an effective safety and health program be established and preserved.

The safety and health of every employee is a high priority. Management accepts responsibility for providing a safe working environment and employees are expected to take responsibility for performing work in accordance with safe standards and practices. Safety and health is only achieved through teamwork. Everyone must join together in promoting safety and health and taking every reasonable measure to assure safe working conditions in the company.



Established 1919

Fillette, Green Shipping Services (USA) Corp.

Vessel Agents

Telephone: (713) 453-5895 (24 Hours) • Fax: (713) 453-7658

Email: hou@fillettegreen.com

HOUSTON, S

August 25, 2025

Broward County
Department of Port of Everglades Business
Administration Division 1850 Eller Drive, Suite 603
Ft. Lauderdale, FL 33316

Attn: Kenty Medina Program Project Coordinator

Christian Bay Shipping Co. dba Fillette Green Shipping Services (USA) Corp will continue its vessel agency operations in south Florida. We continue to have the support of a strong client base and are actively pursuing new clients. We are continuing to cultivate cruise lines business and we anticipate enlarging our presence in that market.

Our organization's marketing strategy continues to target worldwide principals that are encouraged to bring vessels and cargoes to Port verglades because the environment is conducive to conducting vessel operations.

Sincerely,

Derrick N Thomas
President & CEO

5225 Katy Freeway • Suite 690 • Houston, Texas 77007

Offices: Corpus Christi, TX • Point Comfort, TX • Houston, TX • Beaumont, TX • Freeport, TX • New Orleans, LA • Pass Christian, MS • Gulfport, MS • Pascagoula, MS • Mobile, AL • Pensacola, FL • Tampa, FL • Port anatee, FL • Port Everglades, FL • West Palm Beach, FL • Cape Canaveral, FL • Jacksonville, FL • Savannah, GA • Charleston, SC • Wilmington, NC • Baltimore, MD • Richmond, CA • Stockton, C



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No information was found matching your selection criteria. Please try again.

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Facilities Search Results

Criteria selected:

Facility Name = **CHRISTIAN BAY SHIPPING CO.**

Searching For = Search all facilities

For additional information, select the hyperlinks under "Data Links" where available.

D - Provides a list of electronic documents associated with the facility.

F - Provides a facility summary report.

P - Provides facility-related permit information.

M - Provides a GIS map focused on the facility.

Q - Provides a contact for user questions and quality control.

Records on this page = 0 of 0

There are no facilities that meet your criteria.

Disclaimer: The Florida Department of Environmental Protection (FDEP) has made a reasonable effort to ensure that the information provided is up-to-date and comprehensive but cannot guarantee the accuracy or completeness of the data. Any specific, missing information may be obtained through a public records request. For more information visit our [Public Records web site](#).

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Facilities Search Results

Criteria selected:

Facility Name = **FILLETTE GREEN SHIPPING SERVICES (USA) CORP.**

Searching For = Search all facilities

For additional information, select the hyperlinks under "Data Links" where available.

D - Provides a list of electronic documents associated with the facility.

F - Provides a facility summary report.

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Federal government websites often end in .gov or .mil. Before sharing sensitive information, make sure you're on a federal government site.



The site is secure.

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Occupational Safety and Health Administration

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Establishment Search

Reflects inspection data through 08/26/2025

Use our establishment search to locate OSHA enforcement inspections by establishment name. You can also search by a specific inspection number or inspections within a specific industry using NAICS or SIC.

You can now find citation information for violations that Federal OSHA has cited.

For violation and citation results:

- Enter the establishment name in the "Establishment" box and select the "Search" button at the bottom;
- Select the Activity Number (inspection) in the search results;
- If a citation was issued, it will appear under "Violation Items"; and
- Select the "Citation ID" to view the details for that specific citation.

Continue to check back for updates, as citations or violations may be modified during the investigation process.

⚠ Note: Before using our establishment search, please read important information below on how to interpret the results.

Search By:

Your search did not return any results.

Enter an Establishment name, select an OSHA Office, or enter a Site Zip Code.

Establishment

CHRISTIAN BAY SHIPPING CO.

(This field can also be used to search for a State Activity Number for the following states: NC, SC, KY, OR, WA, IN (before April 2022) and AZ (after June 2021))

State

All States



Fed & State



OSHA Office

All Offices



Site Zip Code

Case Status



All



Closed



Open

Inspection Date

Start Date August ▼ 27 ▼ 2020 ▼

End Date August ▼ 27 ▼ 2025 ▼

[Search](#) [Reset](#)**Can't find it?**[For Wildcard search, use %](#)[Establishment Search Help](#)[Search Basics and Search Syntax Examples](#)**NOTE TO USERS**

The Integrated Management Information System (IMIS) was designed as an information resource for in-house use by OSHA staff and management, and by state agencies which carry out federally-approved OSHA programs. Access to this OSHA work product is being afforded via the Internet for the use of members of the public who wish to track OSHA interventions at particular work sites or to perform statistical analyses of OSHA enforcement activity. It is critical that users of the data understand several aspects of the system in order to accurately use the information.

The source of the information in the IMIS is the local federal or state office in the geographical area where the activity occurred. Information is entered as events occur in the course of agency activities. Until cases are closed, IMIS entries concerning specific OSHA inspections are subject to continuing correction and updating, particularly with regard to citation items, which are subject to modification by amended citations, settlement agreements, or as a result of contest proceedings. THE USER SHOULD ALSO BE AWARE THAT DIFFERENT COMPANIES MAY HAVE SIMILAR NAMES AND CLOSE ATTENTION TO THE ADDRESS MAY BE NECESSARY TO AVOID MISINTERPRETATION.

The Integrated Management Information System (IMIS) is designed and administered as a management tool for OSHA to help it direct its resources. When IMIS is put to new or different uses, the data should be verified by reference to the case file and confirmed by the appropriate federal or state office. Employers or employees who believe a particular IMIS entry to be inaccurate, incomplete or out-of-date are encouraged to contact the OSHA field office or state plan agency which originated the entry.

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- Enter the establishment name in the "Establishment" box and select the "Search" button at the bottom;
- Select the Activity Number (inspection) in the search results;
- If a citation was issued, it will appear under "Violation Items"; and
- Select the "Citation ID" to view the details for that specific citation.

Continue to check back for updates, as citations or violations may be modified during the investigation process.

▲ Note: Before using our establishment search, please read important information below on how to interpret the results.

Search By:

Your search did not return any results.

Enter an Establishment name, select an OSHA Office, or enter a Site Zip Code.

Establishment

(This field can also be used to search for a State Activity Number for the following states: NC, SC, KY, OR, WA, IN (before April 2022) and AZ (after June 2021))

State

OSHA Office

Site Zip Code

Case Status ☒ All ☐ Closed ☐ Open

Inspection Date

Start Date August ▼ 27 ▼ 2020 ▼

End Date August ▼ 27 ▼ 2025 ▼

[Search](#) [Reset](#)**Can't find it?**[For Wildcard search, use %](#)[Establishment Search Help](#)[Search Basics and Search Syntax Examples](#)**NOTE TO USERS**

The Integrated Management Information System (IMIS) was designed as an information resource for in-house use by OSHA staff and management, and by state agencies which carry out federally-approved OSHA programs. Access to this OSHA work product is being afforded via the Internet for the use of members of the public who wish to track OSHA interventions at particular work sites or to perform statistical analyses of OSHA enforcement activity. It is critical that users of the data understand several aspects of the system in order to accurately use the information.

The source of the information in the IMIS is the local federal or state office in the geographical area where the activity occurred. Information is entered as events occur in the course of agency activities. Until cases are closed, IMIS entries concerning specific OSHA inspections are subject to continuing correction and updating, particularly with regard to citation items, which are subject to modification by amended citations, settlement agreements, or as a result of contest proceedings. THE USER SHOULD ALSO BE AWARE THAT DIFFERENT COMPANIES MAY HAVE SIMILAR NAMES AND CLOSE ATTENTION TO THE ADDRESS MAY BE NECESSARY TO AVOID MISINTERPRETATION.

The Integrated Management Information System (IMIS) is designed and administered as a management tool for OSHA to help it direct its resources. When IMIS is put to new or different uses, the data should be verified by reference to the case file and confirmed by the appropriate federal or state office. Employers or employees who believe a particular IMIS entry to be inaccurate, incomplete or out-of-date are encouraged to contact the OSHA field office or state plan agency which originated the entry.

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If you have checked an Applicant box for VESSEL BUNKERING, VESSEL OILY WASTE REMOVAL, VESSEL SANITARY WASTE WATER REMOVAL, OR MARINE TERMINAL SECURITY, the following additional information is required:

N/A VESSEL BUNKERING

Section T- A Letter of Adequacy from the U.S. Coast Guard and a copy of the applicant's operations manual approved by the U.S. Coast Guard.

Section V- A copy of the applicant's Oil Spill Contingency Plan for Marine Transportation Related Facilities approved by the U.S. Coast Guard.

Section W- A Terminal Facility Discharge Prevention and Response Certificate with a copy of an approved Oil Spill Contingency Plan from the Florida Dept. of Environmental Protection.

Section Z- An approved Discharge Cleanup Organization Certificate from the Florida Dept. of Environmental Protection which has been issued to the applicant or to its cleanup contractor with a copy of the cleanup contract showing the expiration date.

N/A VESSEL OILY WASTE REMOVAL

Section S - Certificate of Adequacy in compliance with the Directives of MARPOL 73/75 and 33 CFR 158, if applicable.

Section T- A Letter of Adequacy from the U.S. Coast Guard and a copy of the Applicant's operations manual approved by the U.S. Coast Guard.

Section U- A Waste Transporter License from the Broward County Environmental Protection Department identifying the nature of the discarded hazardous (or non-hazardous) material to be transported.

Section V- A copy of the Applicant's Oil Spill Contingency Plan for Marine Transportation Related Facilities approved by the U.S. Coast Guard.

Section W- A Terminal Facility Discharge Prevention and Response Certificate with a copy of an approved Oil Spill Contingency Plan from the Florida Dept. of Environmental Protection.

Section X- A Used Oil Collector, Transporter, and Recycler Certificate from the Florida Dept. of Environmental Protection.

Section Y- An Identification Certificate from the U.S. Environmental Protection Agency.

Section Z- An approved Discharge Cleanup Organization Certificate from the Florida Dept. of Environmental Protection which has been issued to the Applicant or to its cleanup contractor with a copy of the cleanup contract showing the expiration date.

N/A VESSEL SANITARY WASTE WATER REMOVAL

Section U- A Waste Transporter License from the Broward County Environmental Protection Department identifying the nature of the discarded hazardous (or non-hazardous) material to be transported.

Section Z1- A copy of the Applicant's operations manual.

Section Z2- A Septage Receiving Facility Waste Hauler Discharge Permit from the Broward County Water and Wastewater Services Operations Division.

N/A MARINE TERMINAL SECURITY

Section N1- A list of all metal detection devices, walk-through and hand held, as well as all luggage and carryon x-ray machines owned or leased, to be used or domiciled at Port Everglades. Listing must include brand name and model.

Section N2- A copy of all manufacturers recommended service intervals and name of

company contracted to provide such services on all aforementioned equipment.

Section N3- A description of current method employed to assure all equipment is properly calibrated and functioning.

Section N4- current training requirements and training syllabus for employees operating x-ray equipment. Highlight emphasis on weapon and contraband identification.

Include equipment operator certificates, if any.

Section O1- Provide copies of all local, state and federal licenses, including:

a. A copy of the Applicant's State of Florida Business License.

b. A copy of security agency's Manager's "M" or "MB" License and a copy of the security agency's "B" or "BB" License issued by the Florida Department of Agriculture and Consumer Services.

Section P3- SECURITY GUARDS / SUPERVISORS

a. Provide Applicant's background requirements, education, training etc., for personnel hired as security guards.

b. Provide historic annual turnover ratio for security guards.

c. Provide a copy of Applicant's job training program/policy including a copy of training curriculum and copies of all manuals and take-home materials made available to security guards. Include information regarding frequency of training.

d. Provide background requirements, experience, licensing and any and all advanced training provided to supervisory personnel.

e. Provide present policy for individual communication devices either required of security guards or supplied by the employer.

f. Provide procurement criteria and source as well as Applicant's certification requirements for K-9 workforce.

g. Provide information on the number of security guards / supervisors currently employed or expected to be employed to provide security services at Port Everglades.

Supervisors _____
Class D Guards _____
Class G Guards _____
K-9 Handlers _____

Port Everglades Tariff 12

References to the Port Everglades Tariff 12 as amended or reissued: <http://www.porteverglades.net/development/tariff>

Application Fees

The following fees have been established for franchised businesses at Port Everglades. Initial processing fees are nonrefundable. A franchise is required for each category of business.

Stevedore

Initial processing fee, assignment fee, or reinstatement fee \$ 11,550.00

Annual Fee

\$ 4,200.00

Cargo Handler

Initial processing fee, assignment fee, or reinstatement fee \$ 11,550.00

Annual Fee

\$ 4,200.00

Steamship Agent

Initial processing fee, assignment fee, or reinstatement fee \$ 4,200.00

Annual Fee

\$ 2,360.00

Tugboat and Towing

Initial processing fee, assignment fee, or reinstatement fee \$ 27,300.00

Annual Fee

By Contract

Vessel Bunkering, Vessel Oily Waste Removal, Vessel Sanitary Waste Water Removal, Marine Terminal Security Service

Initial processing fee, assignment fee, or reinstatement fee \$ 4,200.00

Annual Fee

\$ 2,360.00

For first-time franchise Applicants, both the initial application fee and the annual fee must be submitted at time of application. Thereafter, annual franchise fees are due and payable each year on the franchise anniversary date, which is defined as the effective date of the franchise.

Note: Check(s) should be made payable to:

BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS and be mailed with this application to:

Port Everglades Business Development Division

1850 Eller Drive, Fort Lauderdale, FL 33316

Required Public Hearing

Staff review of this application will not commence until such time as all of the above requested information and documentation has been provided and the franchise application has been determined by staff to be complete. All of the above requested information and Sections are required to be completed prior to the scheduling of the public hearing. Staff will request that the Broward County Board of County Commissioners set a public hearing to consider the franchise application and hear comments from the public. The Applicant will be notified of the Public Hearing date and is welcome to attend the Public Hearing.

By signing and submitting this application, Applicant certifies that all information provided in this application is true and correct. Applicant understands that providing false or misleading information on this application may result in the franchise application being denied, or in instances of renewal, a franchise revoked. Applicant hereby waives any and all claims for any damages resulting to the Applicant from any disclosure or publication in any manner of any material or information acquired by Broward County during the franchise application process or during any inquiries, investigations, or public hearings.

Applicant further understands that if there are any changes to the information provided herein (subsequent to this application submission) or to its officers, directors, senior management personnel, or business operation as stated in this application, Applicant agrees to provide such updated information to the Port Everglades Department of Broward County, including the furnishing of the names, addresses (and other information as required above) with respect to persons becoming associated with Applicant after its franchise application is submitted, and any other required documentation requested by Port Everglades Department staff as relating to the changes in the business operation. This information must be submitted within ten (10) calendar days from the date of any change made by the Applicant.

Applicant certifies that all workers performing functions for Applicant who are subject to the Longshore and Harbor Workers' Act are covered by Longshore & Harbor Workers' Act, Jones Act Insurance, as required by federal law.

This application and all related records are subject to Chapter 119, F.S., the Florida Public Records Act.

By its execution of this application, Applicant acknowledges that it has read and understands the rules, regulations, terms and conditions of the franchise it is applying for as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended, and agrees, should the franchise be granted by Broward County, to be legally bound and governed by all such rules, regulations, terms and conditions of the franchise as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended.

The individual executing this application on behalf of the Applicant, personally warrants that s/he has the full legal authority to execute this application and legally bind the Applicant.

Signature of Applicant's Authorized

Representative **Cherina Thomas**

Digitally signed by Cherina Thomas
Date: 2025.08.26 01:02:17 -05'00'

Date Signed **08-26-25**

Signature name and title - typed or printed **Cherina Thomas - Chief Operating Officer**

Witness Signature (*Required*)

Witness name-typed or printed **Derrick Thomas**

Witness Signature (*Required*)

Witness name-typed or printed **Jessica Edwards**

If a franchise is granted, all official notices/correspondence should be sent to:

Name **Cherina Thomas**

Title **Chief Operating Officer**

Address **5225 Katy Fwy Suite 690 Houston Tx 77057** Phone **(832) 368-3313**