

DOCUMENT OF COMPLIANCE

No LPR0/RKK/20240304092700

Issued under the provisions of the INTERNATIONAL CONVENTION FOR THE SAFETY OF LIFE AT SEA, 1974, as amended and of Regulation (EC) No 336/2006 on the implementation of the ISM Code

within the Community, under the authority of the Government of

THE PORTUGUESE REPUBL

THE PORTUGUESE REPUBLIC

By BUREAU VERITAS MARINE & OFFSHORE

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COI	MР	A	\sim $^{\prime}$	/

Name: ENTERPRISES SHIPPING & TRADING S.A.

Address: 11, POSEIDONOS AVENUE

167 77 ELLINIKO, ATHENS

GREECE

Company identification number: 0023334

(see paragraph 1.1.2 of Part A of Annex 1 to Regulation (EC) No 336/2006)

THIS IS TO CERTIFY THAT The safety management system of the Company has been audited and that it complies with the requirements of the International Management Code for the Safe Operation of Ships and for Pollution Prevention (ISM Code) for the type(s) of ships listed below:

Bulk carrier			

This Document of Compliance is valid until 07 August 2025, subject to periodical verification.

Completion date of the audit on which this certificate is based: 04 March 2024

Issued at Elliniko, Athens, Greece, on the 04 March 2024

BUREAU VERITAS MARINE & OFFSHORE A. Katsampa



This document is electronically signed and does not require a manual signature as defined in IMO guideline FAL.5-Circ.39.

Click here for the verification website



By Order of the Secretary

Certificate No. LPR0/RKK/20240304092700

ENDORSEMENT FOR ANNUAL VERIFICATION

THIS IS TO CERTIFY THAT, at the periodical verification in accordance with Regulation IX/6.1 of the Convention and paragraph 13.4 of the ISM Code and Article 6 of Regulation (EC) No 336/2006 on the implementation of the ISM Code within the Community, the safety management system was found to comply with the requirements of the ISM Code.

RANGE: From 07 May to 07 November Annually		
1st ANNUAL VERIFICATION	Signed:	
	Place: NOT APPLICABLE	
	Date:	
2nd ANNUAL VERIFICATION	Signed:	
	Place: NOT APPLICABLE	
	Date:	
3rd ANNUAL VERIFICATION	Signed:	
	Place: NOT APPLICABLE	
	Date:	
4th ANNUAL VERIFICATION	Signed:	
	Place:	
	Date:	