2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F37956

Entity Name: UNITED OIL PACKERS INCORPORATED

FILED Jan 06, 2005 Secretary of State

| | mer orange | OIL I MOREINO INCOMI OTOM | | |
|---|--|----------------------------------|---|---|
| Current Principal Place of Business: | | | New Principal Place of Business: | |
| 3200 N.W. MIAMI, FL | 125TH STRE 33167 | ET | | |
| Current Mailing Address: | | | New Mailing Address: | |
| 3200 N.W. MIAMI, FL | 125TH STRE 33167 | ET | | |
| FEI Number: | : 59-2133127 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired (X) |
| Name and | Address of (| Current Registered Agent: | Name and Address | of New Registered Agent: |
| | MITH, MINDA 125TH STRE 33167 US | ET | | |
| | named entity e of Florida. | submits this statement for the p | ourpose of changing its registere | ed office or registered agent, or both, |
| SIGNATUR | RE: | | | |
| | Electro | nic Signature of Registered Age | ent | Date |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | D (HAMERSMITH, 3200 N.W. 125 MIAMI, FL 331 | ST. | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | PD (HAMERSMITH, 3200 N.W. 125 MIAMI, FL | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | VD (HAMERSMITH, 3200 N.W. 125 MIAMI, FL | • | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | CD (HAMERSMITH, 3200 N.W. 125 MIAMI, FL | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: | SD (|) Delete | Title: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: HENRY HAMERSMITH PD 01/06/2005

HAMERSMITH, MINDA,

3200 NW 125TH ST

MIAMI, FL

Name:

Address:

City-St-Zip: