

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006897

FILED  
Apr 11, 2005  
Secretary of State

Entity Name: CROWN CORK & SEAL USA, INC.

**Current Principal Place of Business:**

ONE CROWN WAY  
PHILADELPHIA, PA 191544599 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE CROWN WAY  
PHILADELPHIA, PA 191544599 US

**New Mailing Address:**

FEI Number: 23-2869494      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MECHURA, FRANK J  
Address: ONE CROWN WAY  
City-St-Zip: PHILADELPHIA, PA 191544599 US

Title: TD ( ) Delete  
Name: SZMYT, PATRICK D  
Address: ONE CROWN WAY  
City-St-Zip: PHILADELPHIA, PA 191544599 US

Title: SD ( ) Delete  
Name: BURGESS, GARY L  
Address: ONE CROWN WAY  
City-St-Zip: PHILADELPHIA, PA 191544599 US

Title: VPD ( ) Delete  
Name: VESEY, EDWARD C  
Address: ONE CROWN WAY  
City-St-Zip: PHILADELPHIA, PA 191544599 US

Title: VPD ( ) Delete  
Name: PIERCE, JOSEPH R  
Address: ONE CROWN WAY  
City-St-Zip: PHILADELPHIA, PA 191544599 US

Title: AS ( ) Delete  
Name: HASELROTH, ROSEMARY  
Address: ONE CROWN WAY  
City-St-Zip: PHILADELPHIA, PA 191544599 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in 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.

SIGNATURE: FRANK MECHURA

PD

04/11/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date