## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000001843

Entity Name: SHIPCO TRANSPORT INC.

FILED Mar 29, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
10255 NW 116TH WAY SUITE 3 MIAMI, FL 33178				9960 116TH WAY SUITE 10 MIAMI, FL 33178			
Current Mailing Address:				New Mailing Address:			
80 WASHINGTON STREET HOBOKEN, NJ 07030			- 1	80 WASHINGTON STREET PO BOX 1411 HOBOKEN, NJ 07030			
FEI Number:	13-3468377	FEI Number Applied For ( )	El Numl	ber Not Applic	cable ( )	Certificate	e of Status Desired ( )
Name and	Name and Address of New Registered Agent:						
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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:							
	Electronic	Signature of Registered Agent					ate
Election Campaign Financing Trust Fund Contribution ( ).							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PRES ()[ JEPSEN, KLAUS 80 WASHINGTOI HOBOKEN, NJ	N ST.	1	Title: Name: Address: City-St-Zip:		() Change (	) Addition
Title: Name: Address: City-St-Zip:	SRVP () [ MIKKELSEN, HA 80 WASHINGTOI HOBOKEN, NJ	N STREET	1	Title: Name: Address: City-St-Zip:	MOGELVANO 80 WASHING	(X) Change( G, CHRISTIAN STON STREET NJ 07030 US	•
Title: Name: Address: City-St-Zip:	VP ()[ EKSTROEM, KIN 80 WASHINGTOI HOBOKEN, NJ	N STREET	1	Title: Name: Address: City-St-Zip:		() Change(	) Addition
Title: Name: Address: City-St-Zip:	SEC ()[ COZZARELLI, FI 727 JORALEMOI BELLEVILLE, NJ	RANK N ST.	l ,	Title: Name: Address: City-St-Zip:	COZZARELL	TON STREET	
Title: Name: Address: City-St-Zip:	ASEC ()[ DYRHOLM, STEI 80 WASHINGTOI HOBOKEN, NJ	N ST.	1	Title: Name: Address: City-St-Zip:		()Change(	) Addition
Title: Name: Address: City-St-Zip:	VP ()[ BACH, MORTEN 101 WEST WALI GARDENA, CA S		l ,	Title: Name: Address: City-St-Zip:	BACH, MORT 311 W. ARTE		) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEEN DYRHOLM ASEC 03/29/2006