2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#813845

Entity Name: AMERICAN OIL COMPANY

FILED Feb 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4101 WINFIELD ROAD WARRENVILLE, IL 60555 US **Current Mailing Address: New Mailing Address:** P.O. BOX 1036 WARRENVILLE, IL 605551036 US FEI Number: 36-6024845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BRASSE, PHILIP Name: Name: 4850 E 49TH ST. Address: Address: City-St-Zip: CUYAHOGA HEIGHTS, OH 44125 City-St-Zip: Title: Title: () Delete () Change () Addition Name: CASTANEDO, JP Name: 1323 BOND ST. Address: Address: NAPERVILLE, IL 60563 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition ALTHOFF, DONALD L Name: Name: 28100 TORCH PKWY. Address: Address: City-St-Zip: WARRENVILLE, IL 60555 City-St-Zip: Title: () Delete Title: () Change () Addition STEIN, GEOFF Name: Name: Address: 4101 WINFIELD RD. Address: City-St-Zip: WARRENVILLE, IL 60555 City-St-Zip: Title: Title: () Delete () Change () Addition NOVARIA, ROBERT J Name: Name: 4101 WINFIELD RD. Address: Address: City-St-Zip: WARRENVILLE, IL 60555 City-St-Zip: Title: () Delete Title: () Change () Addition ASAKURA, D.T. Name: Name: 1323 BOND ST. Address: Address: City-St-Zip: City-St-Zip: NAPERVILLE, IL 60563

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: GEOFF STEIN AS 02/17/2005