

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # 855117

1. Entity Name  
HAPAG-LLOYD (AMERICA) INC.



Principal Place of Business  
399 HOES LANE  
TAX DEPARTMENT  
PISCATAWAY, NJ 08854 US

Mailing Address  
399 HOES LANE  
TAX DEPARTMENT  
PISCATAWAY, NJ 08854 US



03242005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
13-2520327

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

|                 |                          |
|-----------------|--------------------------|
| TITLE           | P                        |
| NAME            | MACK, RUDY               |
| STREET ADDRESS  | 399 HOES LANE            |
| CITY - ST - ZIP | PISCATAWAY, NJ 08854     |
| TITLE           | VP                       |
| NAME            | NEWSOME, JAMES           |
| STREET ADDRESS  | 245 TOWNEPARK DR         |
| CITY - ST - ZIP | KENNESAW, GA 30144       |
| TITLE           | VP                       |
| NAME            | SHARON JAIN              |
| STREET ADDRESS  | 399 HOES LANE            |
| CITY - ST - ZIP | PISCATAWAY, NJ           |
| TITLE           | VP                       |
| NAME            | TIM COLLINS              |
| STREET ADDRESS  | 2122 YORK RD., SUITE 250 |
| CITY - ST - ZIP | OAK BROOK, IL 60523      |
| TITLE           | S                        |
| NAME            | ANDREAS, ROTHE           |
| STREET ADDRESS  | 399 HOES LANE            |
| CITY - ST - ZIP | PISCATAWAY, NJ 08854     |
| TITLE           |                          |
| NAME            |                          |
| STREET ADDRESS  |                          |
| CITY - ST - ZIP |                          |

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04/25/05-80105-023 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/05

Date

732 685-6118

Daytime Phone #