## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## **Secretary of State** DOCUMENT # F03000006134 01-24-2005 90050 015 \*\*\*150.00 VALL'S SHIPPING COMPANY Principal Place of Business Mailing Address 210 SOUTH CARANCAHUA, SUITE 600 P.O. BOX 205 50005636 CORPUS CHRISTI, TX 78401 CORPUS CHRISTI, TX 78403-2505 2. Principal Place of Business 3. Mailing Address P. O. BOX 2505 Suite, Apt. #, etc. Suite, Apt. #, etc. 01122005 CR2E034 (10/03) Cha-P 4. FEI Number City & State City & State Applied For 74-2009395 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee.Required\_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be $\Box$ Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PCD TITLE □ Delete TITLE ☐ Change Addition NAME VALLS, RICHARD R NAME STREET ADDRESS 210 SOUTH CARANCAHUA, SUITE 600 STREET ADDRESS CORPUS CHRISTI, TX 78401 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAMÉ WEEKS, JASON E STREET ADDRESS 210 SOUTH CARANCAHUA, SUITE 600 STREET ADDRESS CITY-ST-ZIP CORPUS CHRISTI, TX 78401 CITY-ST-ZIP STD TITLE ☐ Delete TITLE ☐ Change ☐ Addition VALLS, SANDRA H NAME NAME STREET ADDRESS 210 SOUTH CARANCAHUA, SUITE 600 STREET ADDRESS CITY-ST-ZIP CORPUS CHRISTI, TX 78401 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition VALLS, LAURENCE A NAME NAME STREET ADDRESS 210 SOUTH CARANCAHUA, SUITE 600 STREET ADDRESS CITY-ST-ZIP CORPUS CHRISTI, TX 78401 CITY-ST-ZIP TITLE TITLE □ Delete ☐ Change Addition VALLS, RICHARD R JR. NAME NAME 210 SOUTH CARANCAHUA, SUITE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORPUS CHRISTI, TX 78401 CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 en address, with all other like empowered.

FILED Jan 24, 2005 8:00 am