

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F73001

Entity Name: OCEAN CARGO, INC.

FILED
Feb 10, 2004
Secretary of State

Current Principal Place of Business:

1015 BLACKSTONE BLDG
233 E. BAY STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

1015 BLACKSTONE BLDG
233 E. BAY STREET
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-2243496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROCTOR, SOL H
1015 BLACKSTONE BLDG
233 E. BAY STREET
JAX, FL 32202 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: SD () Delete
Name: PROCTOR, SOL H,
Address: 233 E. BAY STREET, SUITE 1015
City-St-Zip: JACKSONVILLE, FL 32202

Title: PD () Delete
Name: TERCERO, E. J.
Address: 2150 S ALAMEDA
City-St-Zip: COMPTON, CA

Title: VD () Delete
Name: GREEK, BILLY D,
Address: 2150 S ALAMEDA
City-St-Zip: COMPTON, CA

Title: D () Delete
Name: PASHA, MARY JANE,
Address: 802 S. FRIES AVE
City-St-Zip: WILMINGTON, CA

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:

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: SOL H. PROCTOR

SD

02/10/2004

Electronic Signature of Signing Officer or Director

Date