## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F73001

Entity Name: OCEAN CARGO, INC.

FILED Jan 21, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1015 BLACKSTONE BLDG JACKSONVILLE, FL 32202 1015 BLACKSTONE BLDG 233 E. BAY STREET

JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

1015 BLACKSTONE BLDG
JACKSONVILLE, FL 32202

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

FEI Number: 59-2243496 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:

PROCTOR, SOL H

1015 BLACKSTONE BLDG

JAX, FL 32202 US

PROCTOR, SOL H

1015 BLACKSTONE BLDG

233 E. BAY STREET

JAX, FL 32202 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: 01/21/2003

Electronic Signature of Registered Agent Date

## Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition

Name: PROCTOR, SOL H, Name: PROCTOR, SOL H,

 Address:
 1015 BLACKSTONE BLDG
 Address:
 233 E. BAY STREET, SUITE 1015

 City-St-Zip:
 JAX, FL
 City-St-Zip:
 JACKSONVILLE, FL 32202

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 TERCERO, E. J.
 Name:

 Address:
 2150 S ALAMEDA
 Address:

 City-St-Zip:
 COMPTON, CA
 City-St-Zip:

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GREEK, BILLY D,
 Name:

 Address:
 2150 S ALAMEDA
 Address:

 City-St-Zip:
 COMPTON, CA
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 PASHA, MARY JANE,
 Name:

 Address:
 802 S. FRIES AVE
 Address:

 City-St-Zip:
 WILMINGTON, CA
 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 01/21/2003