

2005 FOR PROFIT CORPORATION REINSTATEMENT

APPROVAL
AND
FILED

05 OCT 14 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10112005 REIN-P CR2E098 (6/04)

DOCUMENT # F99000000181					
1. Entity Name INTEROCEAN AMERICAN SHIPPING CORPORATION					
Principal Place of Business 221 LAUREL ROAD TWO ECHELON PLAZA, STE. 300 VOORHEES, NJ 08043			Mailing Address 221 LAUREL ROAD TWO ECHELON PLAZA, STE. 300 VOORHEES, NJ 08043		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 13-2835366	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOGEN, BRIAN K 1111 FAIRVIEW AVE., N SEATTLE, WA 98109	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Mitchell D. Walker Two Echelon Plaza, 221 Laurel Rd. Voorhees, NJ 08043	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAGEE, ROBERT P 32001 32ND AVE S FEDERAL WAY, WA 98001	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3000610775022 11/01/05--01055--001 **150.00	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP AGUIRRE, JORGE TWO ECHELON PLAZA, 221 LAUREL RD VOORHEES, NJ 08043	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CAMPBELL, WILLIAM E JR TWO ECHELON PLAZA, 221 LAUREL RD VOORHEES, NJ 08043	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TABBUTT, MARK 1111 FAIRVIEW AVE., N SEATTLE, WA 98109	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. S Lydia A. Bianchini Two Echelon Plaza, 221 Laurel Rd. Voorhees, NJ 08043	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KONOPKA, DIANE L TWO ECHELON PLAZA, 221 LAUREL RD VOORHEES, NJ 08043	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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 like empowered.					
SIGNATURE: <i>William E. Campbell Jr</i>			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		
			Date: 10/12/05		
			Daytime Phone #: 856-770-5614		

K. Eckel OCT 19 2005