## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## Jul 19, 2005 8:00 am **Secretary of State** DOCUMENT # M0200000139, 07-19-2005 90011 010 \*\*\*\*55.00 AES OCEAN EXPRESS LLC Principal Place of Business Mailing Address 20064603 1001 NORTH 19TH ST., STE. 2000 1001 NORTH 19TH ST., STE. 2000 ARLINGTON, VA 22209 ARLINGTON, VA 22209 2. Principal Place of Business 3. Mailing Address 4300 Wilson Bonlevard 4300 Wilson Boulevard Suite, Apt. #, etc. Suite, Apt. #, etc. 06302005 CR2E083 (10/03) Chg-LLC 11th Floor Applied For City & State City & State 4. FEI Number VIRGINIA Virginia Rlinaton ARlinaton 41-2038615 Not Applicable \$5.00 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code City 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 Fillng Fee is \$50.00 Due by September 7, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. PRESIDENT/DIRECTOR Change ☐ Addition ☐ Delete TITLE TITLE EDWARD C. HALL, III NAME HALL, EDAWRD C III NAME 1001 N 19TH STREET, STE 2000 STREET ADDRESS 4300 Wilson Boulevard STREET ADORESS ARLINGTON, VA 22204 CITY-ST-ZIP CITY-ST-ZIP Arlington, VA 22203 VP/DIRECTOR Change TITLE ☐ Addition ☐ Delete TITLE MICHAEL ROMANIW 4300 Wilson Boulevard ROMANIW, MICHAEL NAME NAME 1001 N 19TH STREET, STE 2000 STREET ADDRESS STREET ADDRESS CITY-ST-7IP Arlington, VA 22203 CITY-ST-7IP ARLINGTON, VA 22204 DIRECTOR D ☐ Delete TITLE Change ☐ Addition TITLE MARK LERDAL 4300 Wilson Boulevard LANDAL, MARK NAME NAME STREET ADDRESS 1001 N 19TH STREET, STE 2000 STREET ADDRESS CITY-ST-ZIP Arlington, VA 22203 CITY-ST-ZIP ARLINGTON, VA 22204 TREASURER Change ☐ Detete TITLE ☐ Addition TITLE WILLARD C. HOAGLAND THE HOAGLAND, WILLARD C III NAME NAME 4300 Wilson Boulevard STREET ADDRESS STREET ADDRESS 1001 N 19TH STREET, STE 2000 CITY-ST-ZIP Arlington, VA 22203 CITY-ST-ZIP ARLINGTON, VA 22204 SECRETARY Change ☐ Addition Delete TITLE TITLE THAM NGUYEN 4300 Wilson Boulevard NGYUYEN, THAM NAME STREET ADDRESS STREET ADDRESS 1001 N 19TH STREET, STE 2000 Arlington, VA 22203 CITY-ST-7IP ARLINGTON, VA 22204 CITY - ST - ZIP

FILED

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DIRECTOR

DONALD J. BARTLETT

4300 Wilson Boulevard

Arlington, VA 22203

Change

Addition

THAM NGUYEN SECRETARY SIGNATURE: GNATURE AND TYPED OR PRINTED NAM NG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE