File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris **ANNUAL REPORT** Secretary of State FILED 1999 DIVISION OF CORPORATIONS 99 MAR 16 PM 4: 33 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company SECHETARY OF STATE TALLAHASSEE, FLORIDA **DOCUMENT** # M98000000209 Principal Place of Business Address AMERICAN SHIP MANAGEMENT, LLC 2175 NORTH CALIFORNIA BLVD., SUITE 1000 2175 NORTH CALIFORNIA BLVD., WALNUT CREEK CA 94596 WALNUT CREEK CA 94596 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 03/03/1998 Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 91-196-223 APPLIED FOR City & State City & State Not Applicable 5. Date of Last Report Certificate of Status Desired. Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office CORPORATION SERVICE , COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 Suite Apt #, etc. Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Ancepting Appointment) - (NOTE: Registered Agent signature required when relistantly 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 2175 NORTH CALIFORNIA BLVD WALNUT CREEK CA MGRM PATRIOT HOLDINGS, LLC MGRM PATRIOT CONTRACT SERVI 2175 NORTH CALIFORNIA BLVD WALNUT CREEK CA 200002822662--03/29/39--01145--018 **** 788.75 ****188.75

1. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. If urther certify that the information indicated on this annual 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATED AND TYPED OF PAINTED NAME OF SIGNALOWANAGORD MEMBERS

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