CORPC ANNUAL	OFIT DRATION L REPORT 1996 3-4-96	Sandra Socreta	RIMENT OF STATE 3 Mortham ry of State ORPORATIONS			
OCUME		53 (7)				
Corporation Na	ame Na Shipping Company	r. INC.				
OAHOLIN	THE COMMENT					
ncipal Place of I	Business	Mailing Address			IN IIII Arki Achir aram	
P.O. BOX 70988		P.O. BOX 70988 CHARS, SO. CAROLIN	ia 29415			
CHARS, SO. CA	AROLINA 29415	CHARG, GO, CARIOCIN		3. Date incorporated or Qualified 01/03/1990	3a. Date of Last R 03/31/19	95
Principal Place	of Business	2a. Mailing Address		4. FEI Number 57-0901249	├	Applied For Not Applicable
Suite, Apt. #, e	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional Required
City & State		Oity & State		Flection Campaign Financing Trust Fund Contribution		O May Be
Zip	Country	28	Country	8. This corporation has liability for	intangible tax under s	
	9. Name and Address of Curre	29	30	Florida Statutes L Yes 10. Name and Address of New F	s □ No Registered Agent	
JACKSON	NVILLE FL 32225		84 City		65 7	ip Code
. Pursuant to	the provisions of Sections 607.09	502 and 607.1508, Florida Statu lorida, Such change was authori ection 607.0505, Florida Statute	84 City tes, the above named corporation's bo	oration submits this statement for the pu and of directors. I hereby accept the app	FL T	•
. Pursuant to lor registered familiar with	the provisions of Sections 607.05 diagent, or both, in the State of Fland accept the obligations of, Se	ection our loads, monac sectors	84 City tes, the above named corporation's bo	4/26	Irpose of changing its pointment as registere	registered offi d agent. I am
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14. I do hereby certify that the information supplied will in the Timing is voluntarily according to the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information takes the same legal effect as if made under certify that the information takes the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report or supplemental