2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31462

Entity Name: OOCL \USA\ INC.

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 400	MINO RAMON) ION, CA 94583	3			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX SAN RAM	5100 ION, CA 94583	3			
FEI Number	: 13-4934630	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1201 HAY SUITE 105 TALLAHA The above	S STREET 5 SSEE, FL 323 e named entity			d office or registered agent, or both,	
	e of Florida.			g	
SIGNATU					
51		nic Signature of Registered A	gent	Date	
Election Cal	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LENG, PETER) Delete RAMON, STE. 400 CA 94583	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HAU, T. F.,) Delete RAMON STE 400 CA 94583	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	CHIU, P.W.) Delete RAMON STE 400 DA 94583	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: P.W. CHIU ST 04/18/2005