

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 855117

**Entity Name:** HAPAG-LLOYD (AMERICA) INC.

**Current Principal Place of Business:**

399 HOES LANE  
TAX DEPARTMENT  
PISCATAWAY, NJ 08854

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC0013511496**

**Current Mailing Address:**

399 HOES LANE  
TAX DEPARTMENT  
PISCATAWAY, NJ 08854 US

**FEI Number: 13-2520327**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            FREESE, WOLFGANG  
Address        399 HOES LANE  
City-State-Zip: PISCATAWAY NJ 08854

Title            VP  
Name            ENGEL, THOMAS  
Address        11410 GREENS CROSSING  
City-State-Zip: HOUSTON TX 77067

Title            VP  
Name            DECICCIO, ANTONIO  
Address        401 EAST JACKSON ST  
City-State-Zip: TAMPA FL 33602

Title            VP  
Name            COLLINS, TIM  
Address        3030 WARRENVILLE RD  
City-State-Zip: LISLE IL 60532

Title            DIRECTOR, VP, SECRETARY  
Name            ANGELATOS, HERCULES  
Address        399 HOES LANE  
City-State-Zip: PISCATAWAY NJ 08854

Title            TREASURER  
Name            STILLITANO, MICHAEL  
Address        399 HOES LANE  
City-State-Zip: PISCATAWAY NJ 08854

Title            CHAIRMAN  
Name            JANSEN, ROLF  
Address        BALLINDAMM 25  
City-State-Zip: HAMBURG 20095

Title            DIRECTOR  
Name            O'SHER, STANLEY  
Address        1900 MARKET ST  
City-State-Zip: PHILADELPHIA PA 19103

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE: MICHAEL STILLITANO**

**TREASURER**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name BRAEDEL, PETER  
Address 399 HOES LANE  
City-State-Zip: PISCATAWAY NJ 08854

Title VP  
Name MCGRATH, PATRICK  
Address 399 HOES LANE  
City-State-Zip: PISCATAWAY NJ 08854

Title VP  
Name CLEAVE, GARY  
Address 245 TOWNPARK DR  
City-State-Zip: KENNESAW GA 30144

Title VP  
Name SANDLIN, STUART  
Address 399 HOES LANE  
City-State-Zip: PISCATAWAY NJ 08854

Title VP  
Name PEARSON, HARDY  
Address 401 EAST JACKSON ST  
City-State-Zip: TAMPA FL 33602

Title CORP. CONTROLLER  
Name CASTELLANO, ANTHONY  
Address 399 HOES LANE  
City-State-Zip: PISCATAWAY NJ 08854