

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90030 043 ***150.00

FORM 1001 (01/01)

DOCUMENT # P01000062844
 1. Entity Name
SEA CENTRAL SHIPPING CORP.

Principal Place of Business Mailing Address
2206 E. SAXON STREET **2206 E. SAXON STREET**
TAMPA FL 33605 **TAMPA FL 33605**

2. Principal Place of Business 3. Mailing Address
2377 Guy N. Verger Blvd **2377 Guy N. Verger Blvd.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State **Tampa FL.** City & State **Tampa FL.** 4. FEI Number **59-3728212** Applied For
 Not Applicable
 Zip **33605** Country **USA** Zip **33605** Country **USA** 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FERNANDEZ, JESSICA I
2110 SW 3RD AVE.
APT. 2F
MIAMI FL 33129

7. Name and Address of New Registered Agent
 Name **Fernandez Jessica I.**
 Street Address (P.O. Box Number is Not Acceptable)
1308 Astor Commons Pl. Apt 18-303
 City **Brandon** **FL** Zip Code **33511**

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.
 SIGNATURE *Jessica Fernandez I.* DATE **02-13-02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11?	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete FERNANDEZ, JESSICA I 2206 E. SAXON ST TAMPA FL 33605	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2377 Guy N. Verger Blvd Tampa FL. 33605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete SARABIA, PEDRO J SR., 2206 E. SAXON ST. TAMPA FL 33605	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2377 Guy N. Verger Blvd. Tampa FL. 33605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jessica Fernandez I.* Date **02-13-02** Daytime Phone # **813 2424700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)