

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 04, 2001 8:00 am
Secretary of State

06-04-2001 90012 035 ***150.00

DOCUMENT # P98000103474

1. Entity Name

GLOBAL SHIPPING SOLUTIONS, INC.

Principal Place of Business

**2205 E MICHIGAN ST
 ORLANDO FL 32801**

Mailing Address

**PO BOX 532064
 ORLANDO FL 32801**

2. Principal Place of Business

220 S. LAWSONA Blvd

3. Mailing Address

PO Box 532064

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

ORLANDO, FL

Zip

32801

Country

ORANGE

Zip

32801

Country

ORANGE

4. FEI Number **59-3546821**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BARTRAM, JAMES H
 201 S LAWSONA BLVD
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name **BARTRAM, JAMES H.**

Street Address (P.O. Box Number is Not Acceptable)
220 S. LAWSONA Blvd

City **ORLANDO**

FL

Zip Code **32801**

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

(Signature, typed or printed name of registered agent and title if applicable.)

(NOT Registered Agent's signature required when reinstating)

DATE

4-30-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW
After MAY 1, 2001
Fee IS \$150.00
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

TITLE **PTD** ☐ Delete
 NAME **BARTRAM, JAMES H**
 STREET ADDRESS **201 S LAWSONA BLVD**
 CITY-ST-ZIP **ORLANDO FL 32801**

TITLE **VS** ☐ Delete
 NAME **BARTRAM, NANCY H**
 STREET ADDRESS **201 S LAWSONA BLVD**
 CITY-ST-ZIP **ORLANDO FL 32801**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☒ Change ☐ Addition
 NAME **BARTRAM, JAMES H.**
 STREET ADDRESS **220 S. LAWSONA Blvd**
 CITY-ST-ZIP **ORLANDO, FL 32801**

TITLE **VS** ☒ Change ☐ Addition
 NAME **BARTRAM, NANCY H.**
 STREET ADDRESS **220 S. LAWSONA Blvd**
 CITY-ST-ZIP **ORLANDO, FL 32801**

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01

Date

407-898-0391

Daytime Phone #

CR2E034 (10/00)