

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000099612

**Entity Name:** DROP SHIP LOGISTICS, INC.

**Current Principal Place of Business:**

5901 BENJAMIN CENTER DR  
100  
TAMPA, FL 33634

**Current Mailing Address:**

P.O. BOX 270687  
TAMPA, FL 33688 US

**FEI Number:** 20-1315345

**Certificate of Status Desired:** No

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

PEKAR, VLADISLAV  
5901 BENJAMIN CENTER DR  
100  
TAMPA, FL 33634 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	P	Title	VP
Name	PEKAR, VLADISLAV	Name	PEKAR, YELENA
Address	5901 BENJAMIN CENTER DR	Address	5901 BENJAMIN CENTER DR
City-State-Zip:	TAMPA FL 33624	City-State-Zip:	TAMPA FL 33634

*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:** YELENA PEKAR

VP

04/30/2014

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

\_\_\_\_\_  
Date