

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2001 08:00 AM**
Secretary of State**DOCUMENT # F93000001581**1. Entity Name
WHITLAM LABEL CO., INC.Principal Place of Business
3030 WENTWORTH WAY
TARPON SPRINGS FL 34689 USMailing Address
3030 WENTWORTH WAY
TARPON SPRINGS FL 34689 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

38-1855016

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ANDREANI SANDRA
3030 WENTWORTH WAY

TARPON SPRINGS FL 34689

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 _____ **04/30/2001**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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 T ☐ Delete
NAME SHAIEB JAMES F
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 48015TITLE VP ☒ Change ☐ Addition
NAME SHAIEB JAMES F
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 48015TITLE VP ☒ Delete
NAME SHAIEB RICHARD
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 48015TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE DS ☐ Delete
NAME SHAIEB GEORGE ANTHONY
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 48015TITLE TREA ☒ Change ☐ Addition
NAME SHAIEB GEORGE ANTHONY
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 48015TITLE DP ☐ Delete
NAME SHAIEB EDWARD M
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 48015TITLE SEC ☒ Change ☐ Addition
NAME SHAIEB JOHN P
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 48015TITLE DC ☐ Delete
NAME SHAIEB GEORGE ALBERT
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 49015TITLE PRES ☒ Change ☐ Addition
NAME SHAIEB RICHARD J
STREET ADDRESS 24800 SHERWOOD
CITY-ST-ZIP CENTER LINE MI 49015TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: GEORGE ANTHONY SHAIEB

TREA 04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

EDWARD M. SHAIEB

**24800 SHERWOOD
CENTER LINE, MI 48015**

**MICHAEL A. SHAIEB
24800 SHERWOOD**

CENTER LINE, MI 48015

**RACHEL GILL, DIRECTOR
24800 SHERWOOD**

CENTER LINE, MI 48015

EDWARD M. SHAIEB

**MICHAEL A. SHAIEB
24800 SHERWOOD**

CENTER LINE, MI 48015

**RACHEL GILL, DIRECTOR
24800 SHERWOOD**

CENTER LINE, MI 48015