

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
 05-19-2002 90259 042 ***150.00

20020519

DOCUMENT # P00000043947

1. Entity Name
INTERNATIONAL SHIP OPERATORS, CORP.

Principal Place of Business

9125 SW 77 AVENUE
A205
MIAMI FL 33156

Mailing Address

9125 SW 77 AVENUE
A205
MIAMI FL 33156

001403



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2215 NW 14 St.

Suite, Apt. #, etc.

3. Mailing Address

2215 NW 14 St.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

65-1012504

Applied For

Not Applicable

Zip

33196

Country

Zip

33196

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FERNANDEZ, CARLOS L
9485 SUNSET DRIVE
SUITE A-204
MIAMI FL 33173

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

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, 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

TITLE **D** ☐ Delete
NAME **ROSADO, MARIA E**
STREET ADDRESS **2215 N.W. 14TH STREET**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE **STDA** ☐ Delete
NAME **VELASQUEZ, MARIA I**
STREET ADDRESS **2215 N.W. 14TH STREET**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE **D** ☐ Delete
NAME **VELASQUEZ, MARGARITA**
STREET ADDRESS **2215 N.W. 14TH STREET**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE **P** ☐ Delete
NAME **VELASQUEZ, JORGE**
STREET ADDRESS **2215 N.W. 14TH STREET**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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CITY-ST-ZIP ☐ Change ☐ Addition

CR2E034 (9/01)

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-02

Date

305-635 0420

Daytime Phone #