

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000046541

1. Entity Name

PDS Ocean Corp.



FILED
03 DEC -9 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

16500 Collins Ave
Suite, Apt. #, etc.
2051

3. Mailing Address

P.O. BOX 391
Suite, Apt. #, etc.

REINSTATE DO NOT WRITE IN THIS SPACE

City & State

Sunny Isles Beach, FL

City & State

Arlington, MA

4. FEI Number

04-3651049

Applied For

Not Applicable

Zip

33106

Country

USA

Zip

02134

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required
DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Perry D. Stolberg

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

16500 Collins Ave #2051

City Sunny Isles Beach FL

Zip Code 33106

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Perry D. Stolberg - President

11/19/03

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$350.00

Amended UBR is \$81.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.
☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P/S/O
NAME Perry D. Stolberg
STREET ADDRESS 16500 Collins Ave #2051
CITY-ST-ZIP Sunny Isles Beach, FL 33106

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12. 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 10 or on an attachment with an address, with all other like empowered

SIGNATURE:

Perry D. Stolberg - President

11/19/03
617-783-4255

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone (Area Code)

CR2004B (12/02)

Perry D. Stolberg
PO Box 391
Allston, MA 02134

Ph: (617) 783-4255 Fax: (617) 783-1363

November 19, 2003

TO: Division of Corporations

RE: P02000046541

Dear Sir or Madaam:

The above named corporation has been dissolved on September 19, 2003 due to failure of filing the uniform business report. However, the mailing address on file for the corporation is 17555 Collins Ave #3202, Sunny Isles Beach, FL. However, this is the incorrect address. Therefore, I never received any correspondence, notices, or dissolution letters because the corporation is no longer at that address. Therefore, I am writing that the reinstatement fee of \$500.00 be waived because this is the first time the corporation has been dissolved. Furthermore, I never received any notices that I needed to file the reports.

Sincerely,

A handwritten signature in black ink, appearing to be 'Perry D. Stolberg', written over a horizontal line.

Perry D. Stolberg