

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P04000158971

1. Entity Name
U & S SHIPPING, INC.



FILED

06 JUN 19 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06122006 Chg-P CR2E034 (11/05)

Principal Place of Business
112 PHILADELPHIA WAY
WINTER SPRINGS, FL 32708

Mailing Address
112 PHILADELPHIA WAY
WINTER SPRINGS, FL 32708

2. Principal Place of Business
1650 Tropic Drive
Suite, Apt. #, etc.

3. Mailing Address
1650 Tropic Drive
Suite, Apt. #, etc.

City & State
Winter Springs, Florida

City & State
Winter Springs, Florida

4. FEI Number
20-1913884

Applied For
Not Applicable

Zip
32773

Country
USA

Zip
32773

Country
USA

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

6. Name and Address of Current Registered Agent
HASEEB, MOHAMMED A
112 PHILADELPHIA WAY
WINTER SPRINGS, FL 32708

7. Name and Address of New Registered Agent
Name
Hazem Juma
Street Address (P.O. Box Number is Not Acceptable)
1650 Tropic Drive
City
Sanford FL Zip Code
32773

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: Hazem Juma Hazem Juma June 13, 2006
(NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25 9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD HASEEB, MOHAMMED A 112 PHILADELPHIA WAY WINTER SPRINGS, FL 32708	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP, S, D 800076718218 06/29/06--01047--009 **\$61.25	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD MOHSIN, ZIKRA 112 PHILADELPHIA WAY WINTER SPRINGS, FL 32708	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	P, T. D Juma, Hazem 551 Randon Terrace Lake Mary, Florida 32746	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	gc 6/20	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hazem Juma Hazem Juma, President 6/13/06 407 221-0530
(NOTE: Signature and typed or printed name of signing officer or director)