

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000014102 (6)

1. Corporation Name

ALL SHIPPERS, INC.

Principal Place of Business

6901 VALRIE LANE
RIVERVIEW FL 33569

Mailing Address

6901 VALRIE LANE
RIVERVIEW FL 33569



3. Date Incorporated or Qualified
02/17/1993

3a. Date of Last Report
05/19/1995

4. FET Number

59-3168360

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

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Zip

Country

29

30

9. Name and Address of Current Registered Agent

CHASE, WILLET D II
6901 VALRIE LANE
RIVERVIEW FL 33569

10. Name and Address of New Registered Agent

81 Name

WILLET D. CHASE

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

6901 VALRIE LANE

83

84 City

RIVERVIEW

FL

85 Zip Code

33569

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Willet D Chase

DATE

April 29, 1996

12. OFFICERS AND DIRECTORS

TITLE D
NAME CHASE, WILLET D II
STREET ADDRESS 6901 VALRIE LANE
CITY- ST- ZIP RIVERVIEW FL 33569

☐ DELETE

TITLE
NAME
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CITY- ST- ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition

12 NAME

WILLET D. CHASE

13 STREET ADDRESS

6901 VALRIE LANE

14 CITY- ST- ZIP

RIVERVIEW, FL 33569-4612

2. 1 TITLE

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

3. 1 TITLE

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

4. 1 TITLE

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

5. 1 TITLE

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

6. 1 TITLE

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Willet D Chase II*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29, 1996 (813) 677-2626

CR2E034 (12/95)