

2000 UNIFORM BUSINESS REPORT (UBR)

6/27/00-90004-005-\$150.00-\$150.00

1652

DOCUMENT # 093000050135

1. Entity Name
INFORMATION SERVICE PROVIDERS INC

Principal Place of Business
13485 NW 6 DR
PLANTATION FL
33325-6139

Mailing Address
13485 NW 6 DR
PLANTATION, FL
33325-6139

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP 25 AM 5:49

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2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0426867

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
SHIELDS, BOB
2350 NW 36 AVE
COCONUT CREEK FL
33066

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 _____ DATE _____
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))

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, 2000 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 NAME STREET ADDRESS CITY-ST-ZIP | PRESIDENT ROGER GRIPPO 13485 NW 6 DR PLANTATION FL 33325 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VICE PRESIDENT TERRI SKELTON 13485 NW 6 DR PLANTATION FL 33325 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|---|
| 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"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: Roger Grippo ROGER GRIPPO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/26/00 9548461975
Date Daytime Phone #

CR2E034 (9/99)

2012

Information Service Providers Inc.
13485 NW 6th Drive
Plantation FL 33325

Florida Department of State
Department of Revenue
PO BOX 6327
Tallahassee FL 32314

To Whom It May Concern:

On June 26, 2000 I called the office of the Department of Revenue because review of our records indicated that our check for the annual filing fee had not cleared our bank. I was told to send a copy of the form with another check for \$150.00 along with a letter indicating that the first form and check had apparently been lost. I promptly did so. Upon receipt of the enclosed letter and form indicating that my report has not been filed I again called and was told that there had been a mix up and our letter explaining that the first form had been lost was thrown out by those responsible for opening the letters.

I was told to return the form and the letter and was told that the report will be filed with the original fee of \$150.00.

Sincerely,


Roger Grippo
President