

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000010375

1. Entity Name
RITE WEIGHT BAGS, INC.

FILED
Jan 13, 2000 8:00 am
Secretary of State

01-13-2000 90032 042 ***150.00

Principal Place of Business

5335 VILLAGE MARKET
WESLEY CHAPEL FL 33543

Mailing Address

5335 VILLAGE MARKET
WESLEY CHAPEL FL 34682-2208

2. Principal Place of Business

418 ORIOLE CIR.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 2208

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
PALM HARBOR, FL

Zip
34683

Country
USA

City & State
PALM HARBOR, FL

Zip
34682

Country
USA

4. FEI Number
59-3300963

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SHIPP, DANIEL N
5335 VILLAGE MARKET
WESLEY CHAPEL FL 33543

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

DANIEL N. SHIPP President *Daniel N. Shipp*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/6/00

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
D
SHIPP, DANIEL N
5335 VILLAGE MARKET
WESLEY CHAPEL FL 33543 ☐ Delete

TITLE
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CITY-ST-ZIP
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CITY-ST-ZIP
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP
☐ Change ☐ 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: DANIEL N. SHIPP *Daniel N. Shipp* President 1/6/00 727 934-9377
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #