

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000037714

1. Entity Name  
ANCHOR SHIPPING CO.Principal Place of Business  
1031 IVES DAIRY RD  
#228  
N MIAMI BEACH FL 33179  
USMailing Address  
1031 IVES DAIRY RD  
#228  
N MIAMI BEACH FL 33179  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Zip

Country

4. FEI Number

65-0664140

Applied For  
Not Applicable

5. Certificate of Status Desired

 \$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

HERNANDEZ, ALFRED  
4853 NW 97 AVE  
MIAMI FL 33178

## 7. Name and Address of New Registered Agent

Name

HERNANDEZ, ALFRED

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

6050 NW 3rd ST

City

Miami

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

ALFRED HERNANDEZ, President

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

(NOTE: Registered Agent signature required when reinstating)

3/21/02

DATE

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, 2002 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution. \$5.00 May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PVP  
NAME: HERNANDEZ, ALFRED  
STREET ADDRESS: 2335 NE 195TH ST.  
CITY-ST-ZIP: NORTH MIAMI BEACH FL 33180 Delete Change AdditionTITLE: ST  
NAME: HERNANDEZ, ALFRED  
STREET ADDRESS: 2335 NE 195TH ST.  
CITY-ST-ZIP: NORTH MIAMI BEACH FL 33180 DeleteTITLE: P  
NAME: ALFRED HERNANDEZ  
STREET ADDRESS: 6050 NW 3 ST  
CITY-ST-ZIP: MIAMI, FL 33126 Change AdditionTITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:  Delete 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:

ALFRED HERNANDEZ, President

3/21/02

305-933-2141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0194121  
AV

CR2E034 (9-01)