

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90101 030 ***150.00

DOCUMENT # **P98000062976**

1. Entity Name

SHIPSHAPE SERVICES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1426 N.E. 15TH AVENUE

3. Mailing Address

113 N. FEDERAL HWY.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

FT. LAUDERDALE, FL.

City & State

DANIA BEACH, FL.

4. FEI Number

65-0880640

Applied For

Not Applicable

Zip

Country

33304

Zip

Country

33304

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

GERALD ADAMS

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

113 N. FEDERAL HIGHWAY

City

DANIA BEACH

FL

Zip Code

33304

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

- GERALD ADAMS - REG. AGENT

4-29-02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **P.V.T., S.D.**
NAME **RICHARD PELLEGRINI**
STREET ADDRESS **1426 N.E. 15TH AVENUE**
CITY-ST-ZIP **FT. LAUDERDALE, FL. 33304**

TITLE
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Richard Pellegrini**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD PELLEGRINI - PRESIDENT

4-29-02

Date

Daytime Phone #