

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 06, 2000 8:00 am
Secretary of State

09-06-2000 90096 005 ***550.00

DOCUMENT # P99000074158

1. Entity Name

THE SHIPPING SOURCE, INC.

Principal Place of Business

231 43RD ST. N.
ST. PETERSBURG FL 33713

Mailing Address

231 43RD ST. N.
ST. PETERSBURG FL 33713

2. Principal Place of Business

2945 C EAST BAY DRIVE
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

LARGO, FL

City & State

Zip

33711

Country

USA

Country

4. FEI Number

59-3593983

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEAN, GILLIAN
231 43RD ST. N.
ST. PETERSBURG FL 33713

7. Name and Address of New Registered Agent

Name GILLIAN F. DEAN

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

2945 C EAST BAY DR.

City

LARGO

FL

Zip Code

33711

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

Gillian F. Dean - PRESIDENT

9/1/00

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

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 D ☐ Delete
NAME DEAN, GILLIAN
STREET ADDRESS 231 43RD ST. N.
CITY-ST-ZIP ST. PETERSBURG FL 33713

TITLE D ☐ Delete
NAME DEAN, DERYCK
STREET ADDRESS 231 43RD ST. N.
CITY-ST-ZIP ST. PETERSBURG FL 33713

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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CITY-ST-ZIP

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

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:

GILLIAN F. DEAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/00

Date

(727) 533-9507

Daytime Phone #

CR2E034 (5/00)