2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000080596 Jul 18, 2000 8:00 am 1. Entity Name INTERNATIONAL PURCHASING AND SHIPPING SERVICES. **Secrétary of State** 07-18-2000 90014 001 ***150.00 Principal Place of Business Mailing Address 2057 BONISLE CIRCLE 2057 BONISLE CIRCLE PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 3. Mailing Address 2. Principal Place of Business BAME. SAME. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-095329B Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHIPOCO, JOSE A Street Address (P.O. Box Number is Not Acceptable) 2057 BONISLE CIRCLE PALM BEACH GARDENS FL 33418 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. PD ☐ Delete ☐ Addition TITLE TITLE CHIPOCO, JOSE A NAME NAME 2057 BONISLE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS FL 33418 CITY-ST-ZIP V- PD. ☐ Delete ☐ Change ☐ Addition TITLE TITLE CHIPOCO THELYLL. 2057 Boniste Circle NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY-ST-ZIP PALM DEACH GARDENS ______Addition _ Change_ TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

13. Thereby certify that the information supplied with this filing does not quality 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:

THE REQUIRED

7/12/2000 (561)881-2066.

International Purchasing and Shipping Services, Inc.

2057 Bonisle Circle
Palm Beach Gardens, FL 33418 U.S.A.
Phone (561) 423-1916 Fax (209)828-3398

July 14, 2000

Division of Corporations Uniform Business Report Filings

P.O. Box 1500

Tallahassee, FL 32302-1500

RE: 2000 Uniform Business Report

Document #P99000080596

Dear Sir/Madam:

I am writing to inform you that we did not receive the First Notice on the filing of the above referenced report. Our First Notice was received last week and for that reason we are filing right now and feel we are not responsible for the late filing fee of \$400.00. Enclosed is our completed report along with a check for \$150.00.

Please do not hesitate to contact me with any questions or comments.

Sincerely,

Cheryl Chipoco
Vice President-

cc: Jose Chipoco