

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthorn
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S35732** (4)
1. Corporation Name
SHIPPING DELIGHT, INC.



Principal Place of Business
**1531 LEE RD
WINTER PARK FL 32789**

Mailing Address
**1531 LEE RD
WINTER PARK FL 32789**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified
03/01/1991

3a. Date of Last Report
04/20/1995

4. FEI Number
59-3050618

Applied For
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**SPIVEY, MELANIE
1531 LEE RD
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name **MELANIE SPIVEY**
82 Street Address (P.O. Box Number is Not Acceptable)
1535 KATHRYN DR.
83 **LONG WOOD, FL**
84 City **FL** 85 Zip Code **32750**

11. Pursuant to the provisions of Sections 607.0532 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent

MELANIE SPIVEY 7-15-96

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE	VP
NAME	SPIVEY, MELANIE
STREET ADDRESS	1531 LEE RD
CITY - ST - ZIP	WINTER PARK FL
TITLE	P
NAME	MOINZADEL, MICHAEL
STREET ADDRESS	1531 LEE RD
CITY - ST - ZIP	WINTER PARK FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

☐ Change ☐ Addition

1. TITLE	
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or statement of annual report is true and correct 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; and that I am a resident of the State of Florida. If my name or address has changed since the last report, I have indicated this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in Block 14 if not.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-96 (4-7)629-5453

CR2E034 (12/95)