SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 JUL 19 PM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000001545060
-07/25/95--01053--009
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # **V71551** **(8)**

1. Corporation Name

QUALITY SHIPPING SUPPLY INC.

Principal Place of Business:
202 SOUTH 22ND STREET
SUITE 206
TAMPA FL 33605

Mailing Address:
P.O. BOX 75955
TAMPA FL 33675

3. Date Incorporated or Qualified: **10/12/1992**

3a. Date of Last Report: **07/12/1994**

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

4. FEI Number: **59-3145276** — Applied For ☐ — Not Applicable ☐

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

6. Fee for Computer Processing Third Party Distributor ☐ — **$5.00** May Be Added to Fees

8. The corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

IQBAL, SYED
4119 TARTAN PL
TAMPA FL 33624

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 (Registered Agent's Signature) (As an officer of the registered agent, he/she) (Date)

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City, St. Zip
P	IQBAL, SYED R	4119 TARTAN PLACE	TAMPA FL 33624

New: Address:
IQBAL, SYED. R.
18006. PALM. BRUZON
TAMPA. FL-33647

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 94

☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

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14. I hereby certify that the information indicated on this form is voluntarily furnished and does not equate, for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the annual report or supplemental 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 or the manager or manager empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears above, or below, as an officer or director of the corporation or as a manager with an address

SIGNATURE: SIGNATURE AND TYPE OR PRINT NAME OF SIGNING OFFICER OR DIRECTOR — 7/5/95 — (813) 248-5199

CR2E034 (3/95)

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