

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 04, 2002 8:00 am**  
**Secretary of State**

08-04-2002 90171 001 \*\*\*150.00  
 08-04-2002 90171 002 \*\*\*\*\*8.75

**DOCUMENT # F00000002445**

1. Entity Name

**MAJESTIC TERMINAL SERVICES, INC.**

Principal Place of Business

**13920 THOMAS IMESON AVE., STE. 26  
 JACKSONVILLE FL 32218**

Mailing Address

**PO BOX 90424  
 RALEIGH NC 27675**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

**PMB 114  
 900 Meridian E. STE #19  
 Milton, WA**

**98354**

**USA**

4. FEI Number

**91-2018453**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CELLA, BRIAN D**

**13920 THOMAS IMESON AVE., STE. 26  
 JACKSONVILLE FL 32218**

Name

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

City

**FL**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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, 2002 Fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
 NAME **PC**  
 STREET ADDRESS **CELLA, BRIAN D**  
 CITY-ST-ZIP **13920 THOMAS IMESON AVE., STE. 26  
 JACKSONVILLE FL 32218**

TITLE ☐ Change ☒ Addition  
 NAME **S**  
 STREET ADDRESS **Anderson, Dennis**  
 CITY-ST-ZIP **161 VIA TISDELLE  
 ORANGE PARK, FL 32073**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
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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: Brian Cella**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/29/02**

Date

**253-862-1269**

Daytime Phone #

CR2E034 (4/02)

Attachment 98121

# P00000002445

**OUR MAILING ADDRESS HAS CHANGED  
PLEASE UPDATE YOUR RECORDS**

**Majestic Terminal Services, Inc.  
PMB 114  
900 Meridian E. STE 19  
Milton, WA 98354-7019**



PROUDLY SERVING: GEG(509)838-2668 JAX(904)741-4342 RDU(919)840-0815 ORF(757)852-2799

July 29, 2002

Florida Department of State  
Divisions of Corporations

Re: Uniform Business Report

To Whom It May Concern:

On behalf of Majestic Terminal Services, Inc., I would like to request that the late fee of \$400.00 be waived, as we did not receive the first notice. I have included a check for the original \$150.00 filing fee.

Thank you for your time and consideration. If you have any questions or comments, please feel free to contact me any time.

Sincerely,

Brian Cella  
President  
Majestic Terminal Services, Inc.  
253-862-1269