

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J28850 (2)

1. Corporation Name

MORALES MOVING & STORAGE CO. INC.



Principal Place of Business

2125 NW 1 COURT
MIAMI FL 33127
US

Mailing Address

2125 NW 1 COURT
MIAMI FL 33127
US

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MORALES, RENE
19632 NW 59TH PL
MIAMI FL 33015

3. Date Incorporated or Qualified

08/11/1986

3a. Date of Last Report

04/13/1995

4. FEI Number

59-2710134

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. 199.032,
Florida Statutes ☒ Yes ☐ No

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

Signature of person submitting this report (if not the Registered Agent, signature required) DATE

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. NAME: PDTS MORALES, RENE 2. STREET ADDRESS: 19632 NW 59TH PL 3. CITY-STATE-ZIP: MIAMI FL	1.1 TITLE: ☐ Change ☐ Addition 1.2 NAME: 1.3 STREET ADDRESS: 1.4 CITY-STATE-ZIP:
2. NAME: ☐ DELETE	2.1 TITLE: ☐ Change ☐ Addition 2.2 NAME: 2.3 STREET ADDRESS: 2.4 CITY-STATE-ZIP:
3. NAME: ☐ DELETE	3.1 TITLE: ☐ Change ☐ Addition 3.2 NAME: 3.3 STREET ADDRESS: 3.4 CITY-STATE-ZIP:
4. NAME: ☐ DELETE	4.1 TITLE: ☐ Change ☐ Addition 4.2 NAME: 4.3 STREET ADDRESS: 4.4 CITY-STATE-ZIP:
5. NAME: ☐ DELETE	5.1 TITLE: ☐ Change ☐ Addition 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-STATE-ZIP:
6. NAME: ☐ DELETE	6.1 TITLE: ☐ Change ☐ Addition 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-STATE-ZIP:

14. I do hereby certify that the information supplied with this filing was 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 supplemental annual 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 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Rene Morales, President

2/6/96

(305) 573-4800

CR2E034 (12/95)