

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000026049

FILED
Jun 26, 2006
Secretary of State

Entity Name: ACTION MOVERS AND STORAGE INCORPORATED

Current Principal Place of Business:

190 CATALINA ILE
MERRITT ISLAND, FL 32953

New Principal Place of Business:

190 CATALINA ISLE
MERRITT ISLAND, FL 32953

Current Mailing Address:

190 CATALINA ILE
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 59-3418488 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, KIM H
190 CATALINA ISLES DR
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

ANDERSEN, KIM H P
190 CATALINA ISLE DR
MERRITT ISLAND, FL 32953 US

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: KIM ANDERSEN

06/26/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDERSON, KIM
Address: 190 CATALINA ISLES
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VP (X) Delete
Name: GRIFFIN, CINDA
Address: 190 CATALINA ISLES
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANDERSEN, KIM H P
Address: 190 CATALINA ISLES
City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIM H. ANDERSEN

P

06/26/2006

Electronic Signature of Signing Officer or Director

Date