FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 248902

(9)

A-1 FARGO VAN AND STORAGE,INC.

Principal Place of Business Mailing Address

FILED Apr 02 1997 8:00am Secretary of State

7700 BW 100 ST MIAMI FL 33156	7700 SW 100 ST MIAMI FL 33156-8105						
				3. Date Incorporated or Qualified 06/29/1961	3a. Date of Last Report 11/07/1996		
2. Principal Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For		
21)	26			59-0936451	Not Applicable		
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	η ' ' ' '		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State 28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Bo Added to Fees		
Zip Countri 24 25	[29]	Countr 30	у	8. This corporation has liability for intangible tax under s. 199.032, Ftorida Statutes ✓ Yes No: No:			
9, Name and Addre	ess of Current Registered Agent		·•	10. Name and Address of New Reg	gistered Agent		
BERGER, MICHAEL L. P.A. 9990 SW 77 AVE STE 313			81 Name				
MIAMI FL 33156		82	82 Street Address (P.O. Box Number is Not Acceptable)				
ma ani ca aa ca		83		, and the fill that I government to the first to the firs	Address of the state of the sta		
		84	City		FL 85 Zip Code		
11. Pursuant to the provisions of Sec office or registered agent, or both	tions 607.0502 and 607.1508, Florida Stat n, in the State of Florida. Such change wa	tutes, the about	re-named corpora	poration submits this statement for the pution's board of directors. I hereby accept	urpose of changing its registered the appointment as registered		

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules.									
SIGNATURE Signature, typed or printed nature of registered agent and title if applicable (INCIT). Registered Agent signature required when reinstating) [IATE]									
12. OF LICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF		S IN 12				
TITLE	PDS DELETE	1.1 1011.6		Change	Addition				
NAME	HALE, V.L.	1.2 NAME							
STREET ADDRESS	7700 SW 100TH STREET	1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI, FL 00000	1.4 C(TY-ST-7)P.							
TITLE	☐ DELETE	2 1 11TLF		Change	Addition				
NAME		2.2 NAME							
STREET ADDRESS		2.3 STREET ADDRESS							
CITY-ST-ZIP		2 4 C(1Y-\$1-ZIP	1		·				
TITLE	DELETE	3.1 TITLE		☐ Change	Addition				
NAME		3.2 NAME							
STREET ADDRESS		3.3 STREET ADDRESS							
CITY-ST-ZIP		3.4. CITY-ST-7IP							
TITLE	DELETE	4.1 TITLE		☐ Change	Addition				
NAME	•	4. 2 NAME							
STREET ADDRESS		4.3 STREET ADDRESS							
CITY-ST-ZIP		4.4 CITY - ST - ZIP							
TALE	□ DELETÉ	5.1 TITLE		L] Change	Addition				
NAME		5 2 NAME			į				
STREET ADDRESS		5 3 STREET ADDRESS							
CITY-ST-ZIP		5.4 CI1Y - S1 - ZIP							
TITLE	DELETE	6.1 TITLE		Change	Addition				
NAME		6.2 NAME							
STREET ADDRESS		6.3 STREET ADDRESS							
CITY-ST-ZIP	by certify that the information supplied with this filing does not qualify	6.4 CITY- ST- ZIP							

Information Indicated on this annual report or supplieremental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 if changed, or on an accurate and address