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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # 475671 (4) WEST PASCO MOVING AND STORAGE, INC.  Principal Place of Business Mailing Address 6721 INDUSTRIAL AVE 30 NORTH RING AVENUE PORT RICHEY FL 34688-6823 STE. 400 TARPON SPRINGS FL 34689-4304 US				3. Date Incorporated or Qualified 3a. Date of Last Report		
		•		05/13/1975	05/01/1996	Броп
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-1646238	<del>                                     </del>	optied For
Suite, Apt	#, etc	Suite, Apt. #, etc.			- ¢0.75	ot Applicable Additional
2		27		5. Certificate of Status Desired		equired
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00	
<b>3</b> Zip	Country	Zip	Country	Trust Fund Contribution  8. This corporation has liability for	Added	
4	25	29	30		Yes No	. 188.032,
	<ol> <li>Name and Address of Curre</li> <li>MIS, GEORGE N</li> </ol>	nt Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent	
STE	NORTH RING AVENUE E. 400 RPON SPRINGS FL 34689		82 Street Add 83 Street Add	dress (P.O. Box Number is Not Acceptal		Code
office or	registered agent, or both, in the state	e di Flunda, Such change was	s authorized by the corpora	rporation submits this statement for the pation's board of directors. I hereby acce	brain abbounding as	1091010100
agent. La SIGNATURE	am familiar with, and accept the oblig	gations of, Section 607.0505, F	Florida St <b>atutes</b> . DTE: Registered Agent signature requ	Jrad when reinstalling)	DATE	
agent. La	am familiar with, and accept the oblig  Signatur, typed or providinance of registered as  OFFICERS AN	gations of, Section 607.0505, F	Florida Statutes.		DATE	RS IN 12
agent. I a SIGNATURE	am familiar with, and accept the oblig  Signatur, typed or proced name of registered ag  OFFICERS AN  OS  GUAGLIARDO, DORA	gations of, Section 607.0505, Figentiand little * applicable (NOND DIRECTORS	Florida Statutes.  TE: Registered Agent signature requestable.	Jrad when reinstalling)	DATE CERS AND DIRECTOR	RS IN 12
agent. I : SIGNATUFIE  12. HILE HAME STREET ADDRESS	am familiar with, and accept the oblig  Signatur, bysed or provid name of registered ag  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY	gations of, Section 607.0505, Figentiand little * applicable (NOND DIRECTORS	TIC FIG. Statutes.  TE: Registered Agent signature requ  13.  1.1 TiTLE  1.2 NAME  1.3 STREET ADDRESS	Jrad when reinstalling)	DATE CERS AND DIRECTOR	RS IN 12
agent, 1 is signature  2. ille imme intert address ity st-zip	am familiar with, and accept the oblig  Signatur, typed or provid name of registered as  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, F gent and little if applicable (NO ND DIRECTORS DELETE	Tiorida Statutes.  TE: Registered Agent signature requ  13.  1.1 TiffLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CiTY-ST-ZiP	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change	RS IN 12
agent, 1: SIGNATURE  12. HILE HAME STREET ADDRESS CITY-ST-7IP	am familiar with, and accept the oblig  Signatur, bysed or provid name of registered ag  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY	gations of, Section 607.0505, Figentiand little * applicable (NOND DIRECTORS	TIC FIG. Statutes.  TE: Registered Agent signature requ  13.  1.1 TiTLE  1.2 NAME  1.3 STREET ADDRESS	Jrad when reinstalling)	DATE CERS AND DIRECTOR	RS IN 12
agent, 1 is signature 2.  ILLE IAME STREET ADDRESS CITY-ST-7IP ILLE IAME	am familiar with, and accept the oblig OFFICERS AN OFFICERS AND O	gations of, Section 607.0505, F gent and little if applicable (NO ND DIRECTORS DELETE	TIC FIG. Statutes.  TE: Fig. stered Agent signature requ  13.  1.1 TiTLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CiTY-ST-ZiP  2.1 TITLE	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change	RS IN 12
agont, I is SIGNATURE  2. ITE IAME STREET ADDRESS SITY-ST-ZIP ITE IAME IAME IAME IAME IAME	am familiar with, and accept the oblig OFFICERS AN OFFICERS AN GUAGLIARDO, DORA 6721 INDUSTRIAL WAY PORT RICHEY FL 34668 DT GUAGLIARDO, NICHOLAS	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE	TICITICA Statutes.  TE: Registered Agent signature required.  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 DITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change	RS IN 12 Additio
agent, I is agent. I is signatured.  2.  ILLE  AME  TREFT ADDRESS  ITY - ST- 7IP  ILLE  JAME  JHEET ADDRESS  ITY - ST- ZIP  ILLE	am familiar with, and accept the oblig OFFICERS AN OFFICERS AND O	gations of, Section 607.0505, F gent and little if applicable (NO ND DIRECTORS DELETE	TIORIDA Statutes.  TE: Fieg stered Agent signature requ  13.  1.1 TiTLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-SI-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-SI-ZIP  3.1 TITLE	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change	RS IN 12 Additio
agent, I is SIGNATUFFE  2. ILLE IAME ITEFT ADDRESS SITY-ST-ZIP ILLE IAME ITHEET ADDRESS SITY-ST-ZIP ILLE IAME ILLE IAME	am familiar with, and accept the oblig  Signatur, typed or precedurate of registered as  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE	Tie: Begistered Agent signature required.  13. 1.1 TifUE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITUE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITUE 3.2 NAME	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change	RS IN 12 Additio
agent. I is signature.  2(Le aame treet address aty-st-zip itte iame address itty-st-zip itte iame atmes address itty-st-zip itte iame atmes address itty-st-zip itte iame atmes address atmes address atmes address atmes address atmes address ad	am familiar with, and accept the oblig  Signatur, typed or precedurate of registered as  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE	TICH Hog stered Agent signature required.  13.  1.1 TifUE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFUE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TifUE 3.2 NAME 3.3 STREET ADDRESS	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change	RS IN 12 Additio
agont, I is signature 2.  Ite ame treet address (IY-SI-7/P) Ite image in address (IY-SI-7/P) Ite image in address in addr	am familiar with, and accept the oblig  Signatur, typed or precedurate of registered as  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE	Tie: Begistered Agent signature required.  13. 1.1 TifUE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITUE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITUE 3.2 NAME	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change	RS IN 12 Additio
agont, I is signatured.  2. The ame treet address (ity-st-zip) (ite)	am familiar with, and accept the oblig  Signatur, typed or precedurate of registered as  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE)  DELETE DELETE	TIORIDA Statutes.  DTE: Registered Agent signature required.  13.  1.1 TiTLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-SI-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-SI-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-SI-ZIP	Jrad when reinstalling)	DATE CERS AND DIRECTOR Change Change	RS IN 12 Additio
agont, I is signature 2.  ILLE AME TREFT ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME	am familiar with, and accept the oblig OFFICERS AN OFFICERS AND	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE)  DELETE DELETE	Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	Jrad when reinstalling)	DATE CERS AND DIRECTOR Change Change	RS IN 12 Additio
agent. I is signature.  2. The ame treet address ity-st-zip itle ame treet address itreet address	am familiar with, and accept the oblig OFFICERS AN OFFICERS AND	gations of, Section 607.0505, Figeria and little if applicable (NC) ND DIRECTORS DELETE DELETE DELETE	Tie: Registered Agent signature required.  13.  1.1 Tiffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 Tiffle 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 Tiffle 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change Change Change	RS IN 12 Additio
agent. I is signature.  2. The ame treet address ity-st-zip itte iteet address ity-st-zip itte iteet address ity-st-zip itte	am familiar with, and accept the oblig OFFICERS AN OFFICERS AND	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE)  DELETE DELETE	TICH Registered Agent signature requisits.  13.  1.1 Tiffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIFFLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.5 TIFFLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.5 TIFFLE 5.5 TIFFLE 5.5 TIFFLE 5.5 TIFFLE 5.5 TIFFLE	Jrad when reinstalling)	DATE CERS AND DIRECTOR Change Change	RS IN 12 Additio Additio
agent, I is signature 22.  ILLE AME TREET ADDRESS ITY-ST-7IP ILLE AME TREET ADDRESS ITY-ST-ZIP ILLE AME TREET ADDRESS	am familiar with, and accept the oblig  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figeria and little if applicable (NC) ND DIRECTORS DELETE DELETE DELETE	TIORIDA Statutes.  TE: Registered Agent signature requisits.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change Change Change	RS IN 12 Additio Additio
agont, I is signature 22.  ILLE  AME  TREFT ADDRESS  ITY-ST-7IP  ILLE  AME  TREET ADDRESS  ITY-ST-ZIP  ILLE  AME  TREET ADDRESS	am familiar with, and accept the oblig  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figeria and little if applicable (NC) ND DIRECTORS DELETE DELETE DELETE	TICHICA STATUTES.  21.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change Change Change	RS IN 12 Additio Additio
agont. I is signature 2.  ILLE IAME TREET ADDRESS ICTY-ST-7IP ILLE IAME ITHEET ADDRESS ICTY-ST-ZIP ILLE IAME	am familiar with, and accept the oblig  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE)  DELETE  DELETE  DELETE	TICHICA STATUTES.  21.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change Change Change	Additio
agont, I is signature.  2. The street address of yes to zip the street address of yes the ye	am familiar with, and accept the oblig  OFFICERS AN  DS  GUAGLIARDO, DORA  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668  DPT  GUAGLIARDO, NICHOLAS  6721 INDUSTRIAL WAY  PORT RICHEY FL 34668	gations of, Section 607.0505, Figeria and little if applicable (NC) ND DIRECTORS DELETE DELETE DELETE	TICH Hop stered Agent signature requests.  13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change Change Change	Addition  Addition  Addition  Addition
agont. Is SIGNATURE  12.  ITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	am familiar with, and accept the oblig OFFICERS AN OFFICERS AN OFFICERS AN GUAGLIARDO, DORA 6721 INDUSTRIAL WAY PORT RICHEY FL 34668 DPT GUAGLIARDO, NICHOLAS 6721 INDUSTRIAL WAY PORT RICHEY FL 34668	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE)  DELETE  DELETE  DELETE	TICH Hop stered Agent signature required.  13.  1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 DITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change Change Change	
agont. I :  SIGNATURE  12.	am familiar with, and accept the oblig OFFICERS AN OFFICERS AN OFFICERS AN GUAGLIARDO, DORA 6721 INDUSTRIAL WAY PORT RICHEY FL 34668 DPT GUAGLIARDO, NICHOLAS 6721 INDUSTRIAL WAY PORT RICHEY FL 34668	gations of, Section 607.0505, Figent and little if applicable (NO ND DIRECTORS DELETE)  DELETE  DELETE  DELETE	TICH Hop stered Agent signature requests.  13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE	Jrad when reinstalling)	DATE CERS AND DIRECTOF Change Change Change	Addition  Addition  Addition  Addition

SIGNATURE:

**FILED** 

Apr 29 1997 8:00am

Secretary of State