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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

498476

(1)

ST. PETE. MOVING & STORAGE, INC.

Principal Place of Business	Mailing Address
251 10TH STREET NORTH ST PETERSBURG FL 33705-8491	251 10TH STREET NORTH ST PETERSBURG FL 33705-8491

FILED Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

					L	DO NOT WHITE IN THIS	3FACE	
						Date Incorporated or Qualified		
						03/08/1976		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-1663592		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.7	5 Additional
22	., -,-	27				5. Certificate of Status Desired		Required
City & State	3	City & State				Clastics Committee Cinemater		
└ ′	•					6. Election Campaign Financing Trust Fired Contribution		00 May Be ed to Fees
23	Country	28	Count			Trader and Continued on		
Zip	Country	⊢	Count	y		8. This corporation owes or has paid the cu	_ ′	
24	25		:0			Personal Property Tax due June 30.	∐ Yes	□ No
	g. Name and Address of Current	Hegistered Agent				10. Name and Address of New Registered	Agent	
BA	KER, RAY L		8	1 Nan	ne			
251	I 10TH ST NORTH		8	2 Stre	et Address	s (P.O. Box Number is Not Acceptable)		
	PETERSBURG FL 33705-8491		۳	- 500	et naares.	s (t :O: Dox Normber is Not Acceptable)		
	TETERODORIO TE COTOS CAST		8:	3				
1								
			84	4 City			85 Z	ip Code
						FL		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	the abo	ve-nam	ed corpora	ation submits this statement for the purpose of solutions of directors. I hereby accept the ap	of changin	g its registered
agent, I a	m familiar with, and accept the obliga	tions of Section 607,0505. Flori	da Statut	oy a re c es.	orporation	is board or directors, Thereby accept the ap	pontine it	as registered
1		, , , , , , , , , , , , , , , , , 						-
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable. (NOTE, f	Registered A	gent signs	ture required v	when reinstating) DATE		 [
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	ORS IN 12
TITLE	V	DELETE	1.1 TITLE				Chang	
NAME	BAKER, MICHAEL K		1,2 NAME	:				_
1 1	251 10TH STREET NORTH							j
STREET ADDRESS				T ADDRES	is			
CMY-ST-ZIP	ST PETERSBURG FL	1 05.555	1.4 CITY-					
TITLE	PD	☐ DELETE	2.1 TITLE		1		L Chang	ge L Addition
NAME	BAKER, RAY L		2.2 NAME		j			
STREET ADDRESS	251 10TH ST NORTH		2.3 STRE	T ADDRES	s			į
CITY-ST-ZIP	ST PETERSBURG, FL 00000		2, 4 CITY	- ST- 719				
TITLE	VM	DELETE	3.1 TITLE			· ·	Chanc	e Addition
NAME	BAKER, RAY B		3.2 NAME					. – .
	251 10TH ST NORTH				.			
STREET ADDRESS				T ADDRES	is			
CITY - ST - ZIP	ST PETERSBURG FL		3,4. CITY				·	
TITLE		☐ DELETE	4.1 TITLE				L Chang	ge 🔲 Addition
NAME			4, 2 NAM	E				
STREET ADDRESS			4.3 STREE	T ADDRES	is			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		DELETE	5.1 TITLE				Chang	e Addition
NAME			5.2 NAME					
					.			
STREET ADDRESS			•	T ADDRES	S			
CITY-ST-ZIP			5.4 CITY				F-1	
TITLE		☐ DELETE	6.1 TITLE				Chang	ge 🔲 Addition
NAME			6.2 NAME		[
STREET ADDRESS			6.3 STREE	T ADDRES	s l			
			6,4 CITY-					ļ
CITY-ST-ZIP	and the standard and a second a	she also to the state of the st	■ 0.4 UIIY-	31-4IP		eties 440 07/0V/) Elevido Statutos I furthar a	autifications	the information

14. 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 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 if changed, or on 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 the receiver of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the re

SIGNATURE:

- REC

REQUIFMIChael K. Baker

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1/21/98 (813)821-0607

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