Feb 13, 1999 8:00 am Secretary of State

02-13-1999 90018 025 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 530628

 Corporation 						
GREEN	<i>N</i> AY MOVING & STORAGE	E, INC.				
)	
		Na Way Address				
•	ce of Business	Mailing Address				
1425 SW 1ST	COURT	1311 SE 3RD TERR. POMPANO BEACH FL 3306	n			
UNIT 25 POMPANO BEACH FL 33069 US		U	DO NOT WRITE IN	THIS SPACE		
				3. Date Incorporated or Qualifed		•
				04/01/1977		
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	<u> </u>	lied For
21		26		59-1771560		Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Red	
22 City 8 Ct	4-	27 City & State		1 5 5		'
City & Star	te	— ·		6. Election Campaign Financing Trust Fund Contribution	\$5.00 to Added to	
Zip	Country	28 Zip	Country	This corporation owes the current y		71003
24	25	<u> </u>	30	Personal Property Tax.		□No
24	9. Name and Address of Curr			10. Name and Address of New Regis	tered Agent	
			81 Name		•	
GREEN, RICHARD			82 Street Add	dress (P.O. Box Number is Not Acceptable)		<u> </u>
1425 SW 1ST COURT			OI ON GET AGO	areas (1.0. Box Hamber is Not Acceptable)		
UNIT 25			83			学 精神 深
PON	IPANO BEACH FL 33069		84 City	<u> </u>	85 Zip C	ode Chart
			1 1 1		FL T	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the above-named cor	poration submits this statement for the purp- ion's board of directors. I hereby accept the	ose of changing its	registered
agent. La	registered agent, or both, in the Sta am familiar with, and accept the obli	gations of, Section 607.0505, Flor	rida Statutes.	actions board of directors. Thereby accept the	appointment as reg	noter ou
SIGNATURE						
	Signature, typed or printed name of registered a	<u> </u>	Registered Agent signature requir	ADDITIONS/CHANGES TO OFFICE	ATE DS AND DIDECTOS	2S IN 12
12.		AND DIRECTORS	13.		Change	Addition
TITLE	PDS	C) DELETE	1.2 NAME	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
NAME	GREEN, RICHARD		1.3 STREET ADDRESS			
STREET ADDRESS	,		1			
CITY-ST-ZIP	POMPANO BEACH FL	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change	☐ Addition
TITLE	T OPERA BIOLIAND		2.2 NAME			
NAME	GREEN, RICHARD		2.3 STREET ADDRESS	•		
STREET ADDRESS			1	•		
CITY-ST-ZIP	POMPANO BEACH FL	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change	Addition
TITLE			32 NAME		<u>;</u>	
NAME						
STREET ADDRESS	1			•		
CITY-ST-ZIP .			3.3 STREET ADDRESS			
***************************************		☐ DELETE	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP			
NAME	·	☐ DELETE	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE			
NAME STREET ADDRESS		☐ DELETE	3.3 STREET ADDRESS 3.4. CITY- ST- ZIP 4.1 TITLE 4. 2 NAME			
STREET ADDRESS		DELETE	3.3 STREET ADDRESS 3.4. CITY- ST- ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.3 STREET ADDRESS 3.4. CITY- ST- ZIP 4.1 TITLE 4. 2 NAME			
STREET ADDRESS CITY-ST-ZIP TITLE			3.3 STREET ADDRESS 3.4. CITY- ST- ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP	TO THE SERVE	Change .	Addition
STREET ADDRESS CITY-ST-ZIP TITLE 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		्रिकेट <mark>, Change</mark> ,	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			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	TO THE HERE	Change .	Addition
STREET ADDRESS CITY-ST-ZIP TITLE 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	TO THE SERVE	Change .	Addition

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 an attachagent with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR