

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 608007 (1)
1. Corporation Name
POPE MOVING & STORAGE SERVICE, INC.



Principal Place of Business Mailing Address
2801 S PARK RD 2801 S PARK RD
HALLANDALE FL 33009-3818 HALLANDALE FL 33009-3818

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 3805 NW 132 St.
22 City & State 27 Suite, Apt. #, etc.
23 City & State 28 Opa Locka, FL
24 Zip 25 Country 29 33054 30 USA

3. Date Incorporated or Qualified
01/22/1979
4. FEI Number 59-1895038 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

VERDERBER, JOHN, G., SR.
2801 S PARK RD
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name Moss, Marvin
82 Street Address (P.O. Box Number is Not Acceptable) 20801 Biscayne Blvd. #506
83
84 City NO. Miami Beach FL 85 Zip Code 33180

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE Marvin Moss 7/28/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	VERDERBER, J	33 BEACH RD	NORTHPORT NY	<input type="checkbox"/>
EV	BERKOWITZ, P	3 WHITE CLIFF LANE	ST JAMES NY	<input type="checkbox"/>
V	VERDERBER, JOHN S	2865 NE 25TH STREET	FT. LAUDERDALE FL	<input type="checkbox"/>
V	VENDERBER, JOSEPH J	583 NORTH COUNTRY ROAD	ST. JAMES NY	<input checked="" type="checkbox"/>
S	VERDERBER, JUDITH	33 BEACH ROAD	NORTHPORT NY	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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 attachment with an address.

SIGNATURE Joseph Verderber, Pres. 7/28/98 305 687-3838

CR2E034 (5/98)