

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 680946

FILED  
Aug 31, 2007  
Secretary of State

**Entity Name:** ARNOFF MOVING AND STORAGE OF FLORIDA, INC.

**Current Principal Place of Business:**

3620 S FEDERAL HWY  
FT PIERCE, FL 349826618

**New Principal Place of Business:**

**Current Mailing Address:**

3620 S FEDERAL HWY  
FT PIERCE, FL 349826618

**New Mailing Address:**

**FEI Number:** 59-2044047

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARNOFF, MARC D.  
3620 SOUTH FEDERAL HIGHWAY  
FT. PIERCE, FL 34982 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ARNOFF, MARC D  
Address: 3620 SOUTH FEDERAL HIGHWAY  
City-St-Zip: FT PIERCE, FL 34982

Title: S ( ) Delete  
Name: ARNOFF, PHYLLIS P  
Address: 2157 ALLEN CREEK ROAD  
City-St-Zip: W PALM BEACH, FL 33411

Title: CEO ( ) Delete  
Name: ARNOFF, RICHARD A  
Address: 2157 ALLEN CREEK ROAD  
City-St-Zip: W PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARC ARNOFF

P

08/31/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date