

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003894

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: ALL MY SONS MOVING & STORAGE OF ORLANDO, INC.

## Current Principal Place of Business:

3122-D SHADER ROAD  
SUITE D  
ORLANDO, FL 32808

## New Principal Place of Business:

## Current Mailing Address:

3122 -D SHADER ROAD  
SUITE D  
ORLANDO, FL 32808

## New Mailing Address:

FEI Number: 65-1017365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: DPST ( ) Delete  
Name: PALERMO, AMBROSE  
Address: 3122-D SHADER ROAD  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: PETERSON JR, ROBERT  
Address: 6505 W. PARK BLVD., SUITE 306, PMB 377  
City-St-Zip: PLANO, TX 75093

Title: D ( ) Delete  
Name: DUBBERLY, LINDA  
Address: 3325 FIRST STREET  
City-St-Zip: WEST SACRAMENTO, CA 95691

## 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: AMBROSE PALERMO

DPST

04/02/2009

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

\_\_\_\_\_  
Date