

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 08:00 AM
Secretary of State

DOCUMENT # F97000000612

1. Entity Name

OFFICE MOVERS, INC.



Principal Place of Business

6810 DEERPATH ROAD, STE 100
BALTIMORE MD 21075

Mailing Address

6810 DEERPATH ROAD, STE 100
BALTIMORE MD 21075

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number

52-0915551

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PTD ☐ Delete
NAME KANE, JOHN M
STREET ADDRESS 10032 AVENEL FARM DRIVE
CITY-ST-ZIP POTOMAC MD

TITLE V ☐ Delete
NAME DURFEE, JAMES
STREET ADDRESS 302 COLESVILLE MANOR DR
CITY-ST-ZIP SILVER SPRING MD

TITLE CFO ☐ Delete
NAME SIDELL, BRUCE
STREET ADDRESS 6810 DEERPATH ROAD
CITY-ST-ZIP ELKRIDGE MD

TITLE S ☐ Delete
NAME FLOHR, JEAN
STREET ADDRESS 301 OAK FOREST AVE
CITY-ST-ZIP BALTIMORE MD

TITLE V ☐ Delete
NAME AUCHTER, WILLIAM
STREET ADDRESS 5303 42ND AVENUE
CITY-ST-ZIP HYATTSVILLE MD

TITLE V ☐ Delete
NAME MUNN, ROGER
STREET ADDRESS 17118 BIG FALLS RD
CITY-ST-ZIP MONKTON MD

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS U000000073239
CITY-ST-ZIP 03/02/04-80028-013 150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRUCE SIDELL

Date

Daytime Phone #

2/18/04 410-799-3200