

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000612

FILED
Mar 29, 2005
Secretary of State

Entity Name: OFFICE MOVERS, INC.

Current Principal Place of Business:

6810 DEERPATH ROAD, STE 100
BALTIMORE, MD 21075

New Principal Place of Business:

6500 KANE WAY
ELKRIDGE, MD 21075

Current Mailing Address:

6810 DEERPATH ROAD, STE 100
BALTIMORE, MD 21075

New Mailing Address:

6500 KANE WAY
ELKRIDGE, MD 21075

FEI Number: 52-0915551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PTD () Delete
Name: KANE, JOHN M
Address: 10032 AVENEL FARM DRIVE
City-St-Zip: POTOMAC, MD

Title: V () Delete
Name: DURFEE, JAMES
Address: 302 COLESVILLE MANOR DR
City-St-Zip: SILVER SPRING, MD

Title: CFO () Delete
Name: SIDELL, BRUCE
Address: 6810 DEERPATH ROAD
City-St-Zip: ELKRIDGE, MD

Title: S () Delete
Name: FLOHR, JEAN
Address: 301 OAK FOREST AVE
City-St-Zip: BAITIMORE, MD

Title: V (X) Delete
Name: AUCHTER, WILLIAM
Address: 5303 42ND AVENUE
City-St-Zip: HYATTSVILLE, MD

Title: V (X) Delete
Name: MUNN, ROGER
Address: 17118 BIG FALLS RD
City-St-Zip: MONKTON, MD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: KANE, JOHN M
Address: 6500 KANE WAY
City-St-Zip: ELKRIDGE, MD 21075

Title: VP (X) Change () Addition
Name: MELIKER, RON
Address: 6500 KANE WAY
City-St-Zip: ELKRIDGE, MD 21075

Title: CFO (X) Change () Addition
Name: SIDELL, BRUCE
Address: 6500 KANE WAY
City-St-Zip: ELKRIDGE, MD 21075

Title: S (X) Change () Addition
Name: FLOHR, JEAN
Address: 6500 KANE WAY
City-St-Zip: ELKRIDGE, MD 21075

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 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 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: BRUCE R. SIDELL

CFO

03/29/2005

Electronic Signature of Signing Officer or Director

Date