## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 19 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

K83334

(8)

GRAEBEL/SOUTH FLORIDA MOVERS, INC.				 	ATRIA BIBIL BIBIL BIBIL BIBIL BIBIL BIBIL
\ <u></u>		7017 18-84 - 624			
Principal Place of Business Mailing Address				A sensitive and town state them will both	bedet diate Graffi gebei diate Bjøfe 1864
701 NW 331	RD ST	701 NW 33RD ST			
SUITE 190 SUITE 190 POMPANO BEACH FL 33064 POMPANO BEACH FL		INR4	DO NOT WRITE IN THIS SPACE		
US	observe seems	US US	<b>100</b> 4	3. Date Incorporated or Qualified	
				04/25/1989	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	# - E-	26	<u> </u>	65:0109880	Not Applicable
Suite, Apt.	#, 8 <b>(</b> C.	Suite, Apt. #, etc.		5. Certificate of Status Desired	<b>\$8.75</b> Additional Fee Regulred
City & State	9	City & State		6, Election Campaign Financing	<del></del>
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid to	
24	25		10	Personal Property Tax due June 30.	Yes No
Ac. :	g, Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regist	ered Agent
WELD 1808 Name P				rown Steve	
701 33RD ST 82 Street Add			ess (P.O. Box Number is Not Acceptable)		
83 63 83 63 63 63 63 63 63 63 63 63 63 63 63 63				21 NW Sara ist	ree
/ 2	O BEACH FL 33064		- 1" 5	buite 190	
	<b>7</b> .		84 City	Laurana Barda	FI 85 Zio Code
11. Pursusing	o the provisions of Sections 607.050	02 and 607.1/308. Florida Statutes	the above-named core	poration submits this statement for the purp	
office or re	egistered agent, or both, in the State	of Florida Such change was au	thorized by the corporat	poration submits this statement for the purp ion's board of directors. I hereby accept the	e appointment as registered
SIGNATURE	Steve Brown		on only nes.		
SIGNATURE:	Signature, typod or pointed name of required a p	interference at applicable (NOTI	Hegistered Agent signature requir	ed when reinstating)	ATE
	<del></del>	O DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
]	PTD	C DELETE	1.1 TITLE		Change Addition
2	GRAEBEL, DAVID W.		1.2 NAME		
ESS	401 S. AIRPORT BLVD.		1.3 STREET ADDRESS		
ST-ZIP	AURORA CO 80017 S/D	☐ DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Closer Classics
	GRAEBEL, LOIS G.		2.1 MILE 2.2 NAME		Change Addition
878-1200	401 S. AIRPORT BLVD.		2.3 STREET ADDRESS		
cric si	AURORA CO 80017		2. 4 CITY-ST-ZIP		
	V/D	DELETE	3.1 TITLE		Change Addition
NAME .	WARE, G. LANE		3.2 NAME		
STREET ADDRESS	500 3RD ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	WAUSAU WI 54403		3.4. CITY-SY-ZIP		
TITLE	AS	DELETE	4.1 TOTLE		Change Addition
NAME	LEE, GENE		4. 2 NAME		
STREET ADDRESS	401 S. AIRPORT BLVD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	AURORA CO 80017		4.4 CITY - ST - ZIP		
TITLE	VP	☐ DELETE	5.1 TITLE		Change Addition
NAME CTOCET ADDRESS	GRAEBEL, BENJAMIN D		5.2 NAME		
STREET ADDRESS	401 S. AIRPORT BLVD. AURORA CO		5.3 STREET ADDRESS		*
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		Change Addition
STREET ADDRESS			6.3 STREET ADDRESS		ĺ
CITY-ST-ZIP			6.4 City-St-ZiP		
14 Thereby co	ertify that the information supplied w	ith this filing does not qualify for	the everyotion state of in I	Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information
officer or d	firector of the corporation of the reci	eiver or trustee empowered to ex	ate and that my signatur ecute this toport as requ	section 119.07(3)(i), Florida Statutes. I further shall have the same legal effect as if marrired by Chapter 607, Florida Statutes; and	de under oath; that I am an
Block 12 o	r Bl <b>oc</b> k 13 il changed, or on an atta	chment with an actiress.		/ 1	