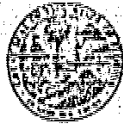


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -6 PM 4:25

DOCUMENT # M88383 (8)

1. Corporation Name

AIRLINE MOVING AND STORAGE INC.

Principal Place of Business

142 STOCKTON ST
JACKSONVILLE FL 32204

Mailing Address

142 STOCKTON ST
JACKSONVILLE FL 32204

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21 106 Stockton Street

Suite, Apt. #, etc.

City & State

23 Jacksonville, Florida

Zip

24 32204

Country

25 Duval

2a. Mailing Address

26 106 Stockton Street

Suite, Apt. #, etc.

City & State

28 Jacksonville, Florida

Zip

29 32204

Country

30 Duval

3. Date Incorporated or Qualified

06/24/1988

3a. Date of Last Report

02/28/1994

4. FEI Number

59-2913545

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

O'HARA, DANIEL
7901 4TH STREET NORTH SUITE 308

ST. PETERSBURG FL 33734-6300

10. Name and Address of New Registered Agent

81 Name Howard L. Knight
82 Street Address (P.O. Box Number is Not Acceptable)
106 Stockton Street
83
84 City Jacksonville FL 85 Zip Code 32204

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0504, Florida Statutes.

SIGNATURE

Howard L. Knight

02/02/95

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

(Date of Signature or Date Required when Consulting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	O'HARA, DANIEL	7901 4TH ST N SUITE 308	ST. PETERSBURG FL
V	TAYLOR, GREGORY	7901 4TH ST., N., STE. 308	ST. PETERSBURG FL
S	KNIGHT, HOWARD	7901 4TH ST N SUITE 308	ST. PETERSBURG FL
T	RICKETTS, J. BARRY	7901 4TH ST N SUITE 308	ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
☒ Change ☐ Addition		Resigned/Delete	
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
☒ Change ☐ Addition	V/D	Taylor, Gregory	106 Stockton Street Jacksonville, Florida 32204
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
☒ Change ☐ Addition	P/S/T/M	Knight, Howard L.	106 Stockton Street Jacksonville, Florida 32204
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
☐ Change ☐ Addition		Resigned/Delete	
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
☐ Change ☐ Addition			
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
☐ Change ☐ Addition			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 custodian empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Howard L. Knight

Howard L. Knight

02/02/95

(904) 353-3185

(Signature and typed or printed name of signing officer or director)

Date

(Typed Name)