

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102316

FILED  
Mar 28, 2007  
Secretary of State

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

**Current Principal Place of Business:**

7455 16TH STREET EAST  
BLDG A SUITE 109  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

472 HOLIDAY DR  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

FEI Number: 65-1052122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PETERSON, BETTY  
7455 16TH STREET EAST  
BLDG. A, STE. 109  
SARASOTA, FL 34243 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: PD ( ) Delete  
Name: PETERSON, BETTY  
Address: 472 HOLIDAY DRIVE  
City-St-Zip: HALLANDALE, FL

Title: VP ( ) Delete  
Name: ALAIMO, ROSARIO  
Address: 7455 16TH STREET EAST, STE. 109  
City-St-Zip: SARASOTA, FL 34243

Title: STD ( ) Delete  
Name: DUBBERLY, LINDA  
Address: 472 HOLIDAY DR  
City-St-Zip: HALLANDALE, FL 33009

**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 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: BETTY PETERSON

PD

03/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date