## 2004 FOR PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Jun 23, 2004 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # P02000039564 06-23-2004 90002 019 \*\*\*150.00 PICK & ROLL MOVING & STORAGE INC. Principal Place of Business Mailing Address 54058515 2470 SW 56 AVENUE 2470 SW 56 AVENUE HOLLYWOOD, FL 33023<sup>a</sup> HOLLYWOOD, FL 33023 2. Principal Place of Business 3. Mailing Address PEMBRIKE RD 3140 N. EMBRSKZ RD Suite, Apt. #, etc. 06212004 Chg-P CR2E034 (10/03) # 60 Sity & State Applied For 4. FEI Number EMBRO 73-1636504 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ULTMAN, ITAI Street Address (P.O. Box Number is Not Acceptable) 2470 SW 56 AVENUE HOLLYWOOD, FL 33023 City 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 6-21-04 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution, Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE [ ] Change Addition NAME ULTMAN, ITAI NAME 2470 SW 56 AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-78 HOLLYWOOD, FL 33023 CITY-ST-7/P TITLE Change TITLE ☐ Delete ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -TiTLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CtTY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [7] Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

6-21-04

Date

Daytime Phone #

Attachmont

54058515

## PICK & ROLL MOVING & STORAGE INC. 3140 W. PEMBROKE RD PEMBROKE PARK, FL 33009

June 19, 2004

Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re-DOC#P02000039564

Dear Sir or Madam:

I ask that the penalty for the failure to file an annual report be waived. The taxpayer never received the renewal form due a change in the address. The penalty will create a hardship for my business and I ask that you please waive it.

Enclosed are my 2004 UBR forms with my fee of \$150.00

Thank you very much for you help and understanding.

Sincerely,

Itai Ultman