

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000099337

**FILED**  
**Jan 18, 2005**  
**Secretary of State**

**Entity Name:** MEDINA GROUP FILL MOVERS, INC.

**Current Principal Place of Business:**

8221 GLADES ROAD  
202  
BOCA RATON, FL 33434

**New Principal Place of Business:**

501 VILLA CIRCLE  
501  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

8221 GLADES ROAD  
202  
BOCA RATON, FL 33434

**New Mailing Address:**

501 VILLA CIRCLE  
501  
BOYNTON BEACH, FL 33435

**FEI Number:** 16-1627135

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEDINA, AVI  
8221 GLADES ROAD  
202  
BOCA RATON, FL 33434 US

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

MEDINA, AVI  
501 VILLA CIRCLE  
501  
BOYNTON BEACH, FL 33435 US

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: AVI MEDINA

01/18/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MEDINA, AVI  
Address: 8221 GLADES ROAD SUITE 202  
City-St-Zip: BOCA RATON, FL 33434

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MEDINA, AVI  
Address: 501 VILLA CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33435

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: AVI MEDINA

P

01/18/2005

Electronic Signature of Signing Officer or Director

Date