2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000135536

1. Entity Name

VESÉLY BROS. MOVING & STORAGE OF FLORIDA, INC.



FILED Apr 24, 2007 08:00 AM Secretary of State

Principal Place of Business

1450 TURNBULL BAY ROAD NEW SMYRNA BEACH, FL 32168 Mailing Address

1450 TURNBULL BAY ROAD NEW SMYRNA BEACH, FL 32168



04232007

No Chg-P

CR2E034 (11/05)

4. FEI Number 27-0039894

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

			a.e. (`		TINO OF ACE	mage of the first of the state
				•		, , , , , , , , , , , , , , , , , , ,
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.						
SIGNATURE_	Signature, typed or printed name of registered agent and title st	applicable. (NOTE: Registered	Agent signature	a required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing 🗆	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE	PD				Loopanaman	naa
NAME	VESELY, JOSEPH				U000007275	
STREET ADDRESS CITY-ST-ZIP	316 FINLEY ROAD		, · · · · · · · · · · · · · · · · · · ·		05/04/07-8006	37-006 150.00/
	BELLE VERNON, PA 15012 VSTD			6		
TITLE NAME	VESELY, PETER J		,		The state of the s	
STREET ADDRESS	316 FINLEY ROAD					
CITY-ST-ZIP	BELLE VERNON, PA 15012		at .			
TITLE						
NAME			14.3			
STREET ADDRESS				DO	NOT WRITI	=
CITY-ST-ZIP		-			ř	· · · · ·
TITLE :				IN '	THIS SPACE	
STREET ADDRESS			3 4-4 ->	* * * * * * * * * * * * * * * * * * * *		
CITY-ST-ZIP					Company of the control of the contro	
TITLE			4 30			*
NAME				•	•	
STREET ADDRESS				,		
CITY-ST-ZIP				4 4	to the second of the second of	, g ,
TITLE				4		
NAME STREET ADDRESS						
CITY-ST-ZIP			, ,	ь (ti vag
	partify that the information expelled with this file	ing door not qualify for the aver			O. Florido Statutas I further agri	tifu that the information

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or emplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the feccenter 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.

SIGNATURE:

WHAT ISE AND TYPED OF PRINTED MAN

Joseph V. Vesely

April 23, 2007

386-428-9017

Date

Daytime Phone #