


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90312 020 ***150.00

DOCUMENT # P04000085674	
1. Entity Name FIND US MOVERS, INC.	

Principal Place of Business 2151 NE 56TH CT FORT LAUDERDALE, FL 33308	Mailing Address 2151 NE 56TH CT FORT LAUDERDALE, FL 33308
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2. Principal Place of Business 3680 N. 56 Ave	3. Mailing Address 3680 N. 56th Ave
Suite, Apt. #, etc. 822	Suite, Apt. #, etc. 822

City & State Hollywood FL	City & State Hollywood FL
Zip 33021	Country USA

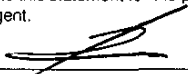
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03112005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent BEN-KESSOUS, YOSSEI 2151 NE 56TH CT FORT LAUDERDALE, FL 33308	
7. Name and Address of New Registered Agent Name YOSSEI ben-kessous Street Address (P.O. Box Number is Not Acceptable) 3680 N. 56th Ave #822 City Hollywood FL Zip Code 33021	

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  DATE **04/13/05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BEN-KESSOUS, YOSSEI 2151 NE 56TH CT FORT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:  **YOSSEI ben-kessous** **04/12/05** **954-599-9338**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #