## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000039604 (2)

SORENSEN MOVING & STORAGE OF ORLANDO COMPANY, IN

**FILED** May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					iraa tiita täisa Eriit aarii atai isa
1075 GILLS DR., SUITE 300 100 RIALTO PLACE					
ORLANDO FL 32901		SUITE 510 MELBOURNE FL 32901 US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				05/27/1993	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3200974	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		[27]			Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	<b>28</b>	Country	Trust Fund Contribution	
24	25	29 3		<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>	e current year intangible
24	9. Name and Address of Curren			10. Name and Address of New Registe	
BOYD, JOEL 8					
100 RIALTO PLACE, SUITE 510 MELBOURNE FL 32901			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
			51reel A	udiess (P.O. Box Number is Not Acceptable)	
			83	, ,	
			84 City		85 Zip Code
			City		FL   2 p cool
11. Pursuant to the provisions of Sections 607.0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
Signature, typed or printed rained of requisitived agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND	D DIFFECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE	PS CODENCEN COOTT	C DELETE	1.1 TITLE		Citaine Signature
NAME	SORENSEN, SCOTT 3930 HIDDEN OAKS LANE		1.2 NAME 1.3 STREET ADDRESS		
STREET ADDRESS	MELBOURNE FL 32935		1.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	MELDODINIL I L SESS	DELETE	21 TITLE		Change Addition
NAME		<del></del>	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	•	····
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TIFLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		TALLES TALLES
TITLE		☐ DELETE	61 TIFLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY-ST-ZIP		

indicated on this annual report or supplied with this iming does not quality for the exemption stated in Section 119.07(5)(i), Florida Statutes. Turner certify that the informatic indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed or or that attachment with an address.