

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 AM 11:05

DOCUMENT # P93000080392 (2)

1. Corporation Name

EASTERN VAN LINES, INC.

Principal Place of Business

**3719 CORPOREX PARK DRIVE
TAMPA FL 33619**

Mailing Address

**3719 CORPOREX PARK DRIVE
TAMPA FL 33619**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/15/1993

3a. Date of Last Report

06/01/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

APPLIED FOR 59-3091203

Applied For

Not Applicable

Suite, Apt. #, etc.

#300

Suite, Apt. #, etc.

#300

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

22

City & State

27

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

Country

23

Zip

Country

28

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**MOULING, KATHY L
308 E. MARTIN LUTHER KING BLVD.
TAMPA FL 33603**

10. Name and Address of New Registered Agent

81. Name

Eugene R. Antonelli

82. Street Address (P.O. Box Number is Not Acceptable)

3719 Corporex Park Drive, #300

83. City

Tampa

84. State

FL

85. Zip Code

33619

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

Eugene R. Antonelli

(NOTE: Registered Agent signature required when instituting)

DATE

2/17/95

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

**ANTONELLI, EUGENE R
2513 ARBORWOOD DRIVE
VALRICO FL 33594**

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 on an attachment with an address.

SIGNATURE:

Eugene R. Antonelli

PRINT NAME AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

2/17/95

Signature (Block 14)