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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000039057 (2)

ROLAND & SON MOVING, INC.

Principal Place of Business

5060 SW 64TH AVE. SUITE 203 Mailing Address

5060 SW 64TH AVE. SUITE 203

FILED Apr 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE DAVIE FL 33314 DAVIE FL 33314 3. Date Incorporated or Qualified 05/24/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For HAIM TRACE LANGING 5901 Pointrace hadling 65-0492878 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible Country BROWARD BROWARU Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROBBINS & LANDINO P.A. 4901 N.W. 17TH WAY Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 305 83 FT LAUDERDALE FL 33309 Zip Code 84 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE 1.1 TITLE Addition TITLE ROLAND, JOHN NAME 1.2 NAME PRIM TRACE LANdings DE Apt 107 5060 SW 64TH AVE. 1.3 STREET ADDRESS STREET ADDRESS **DAVIE FL 33314** 1.4 CITY-ST-ZIP CITY-ST-ZIP ■ DELETE 2.1 TITLE Change Addition TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP Chance Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ... DELETE 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 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 coreiver 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: John Rulanch John Boland President 4-17-98 954-741-1919