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

**PROFIT** CORPORATION ANNUAL: REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000009423

1. Corporation Name

SOUTH FLORIDA MOVING & STORAGE, INC.

## **FILED** Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90040 042 \*\*\*150.00



Principal Place	e of Business	Mailing Address					
3805 N.W. 132 STREET 3805 N.W. 132 STREET							
MIAMI FL 3305	4 :	MIAMI FL 33054			DO NOT WRITE IN THIS S	PACE	
					3. Date Incorporated or Qualifed		
					01/26/1995		
2 Daineinal D	lone of Rusinana	2a. Mailing Address	_		4. FEI Number	Δn	plied For
	lace of Business	1 AFE 3 000 3044	· c+		65-0553654	- <del></del>	ot Applicable
	SW 39th St.	26 2551 SW 39TN Suite, Apt. #, etc.	1 00	<u> </u>		\$8.75	
Suite, Apt.	#, etc.	<b>—</b>			5. Certificate of Status Desired	Fee Re	
22 #100 City & Stat		27 #100	<del>-</del>	····	6 Election Compaign Figureins	\$5.00	Nav. Da
— ·	<u>, 5</u>	<del> </del>	٦ -	T3 T	6. Election Campaign Financing Trust Fund Contribution	Added t	-
Zip Zip	Lauderdale, FL Country	28 Ft. Lauderda	Country	F'L	This corporation owes the current year Intar		
$\neg$	oounuy.	——————————————————————————————————————	,		1	Yes	□No
<sup>24</sup> 3331	9. Name and Address of Current	<del></del>		·· · · · ·	10. Name and Address of New Registered A		
	* Italia alla Mariess di Galletti		81	Name			
MOS	SS, MARVIN					<del>.</del>	
	1 BISCAYNE BLVD, #506		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
NOR	ITH MIAMI BEACH FL 33180		83				
			"			·	
Î		•	84	City	FL	85 Zip (	Code
11 Pursuant	to the provisions of Sections 607 0502	and 607,1508, Florida Statutes, th	he above	e-named corpo	pration submits this statement for the purpose of cl	hanging its	registered
office or r	edistered agent or both, in the State of	of Florida. Such change was author	rized by i	tne corporatioi	n's board of directors. I hereby accept the appoint	ment as re	gistered
agent. La	m familiar with, and accept the obligati		statutes.				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Regis	stered Agen	t signature required	when reinstating) DATE		
12.	OFFICERS AND		13.	g	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	P		1.1 TITLE			Change	☐ Addition
NAME	VERDERBER, JOHN G SR	Į,	1,2 NAME				
STREET ADDRESS	2801 S PARK RD		1,3 STREET	ADDRESS			Ì
	HALLANDALE FL 33009		1.4 CITY-ST		•		ł
CITY-ST-ZIP TITLE	VP		,,-t G, r 1- G1				Addition
	VERDERBER, JOSEPH JR	☐ DELETE ■:	2.1 TITLE	,		Change	
NAME		_	2.1 TITLE	ĺ		Change	
STREET ADDRESS	I 20 IEEEEDOON AVE	-	2.2 NAME	ADDRESS		Change	
CITY-ST-ZIP		_	2.2 NAME 2.3 STREET			Change	
	ST JAMES NY 11780		2.2 NAME 2.3 STREET 2. 4 CITY-S				
TITLE		DELETE	2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE			☐ Change	☐ Addition
NAME	ST JAMES NY 11780	DELETE	2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	T-ZIP	- 10 - <del>1</del>		
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14. 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 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, with all other like empowered.

SIGNATURE: