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

CORPORATION

STREET ADDRESS

BRANDON MOVERS, INCORPORATED

PROFIT ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT** # P95000038383 (2)

FILED Feb 10 1998 8:00am Secretary of State

Principal Plac	20 of Pusingue	M. O. Add				
Principal Place of Business		Mailing Address			***************************************	
2107 N. 65TH ST. TAMPA FL 33619 US		2107 N. 65TH ST. TAMPA FL 33619				
		US			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
Principal F	Place of Business	2a. Mailing Address			05/15/1995	
2. Principat Place of Business		26. Walling Address		4. FEI Number	Applied For	
Suite, Apt	#, etc	Suite, Apt. #, etc.			59-3315259	Not Applicable \$8.75 Additional
22		[27]		5. Certificate of Status Desired	Fee Required	
City & Stat	io	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the	current year Intangible
24	25	[29]	30		Personal Property Tax due June 30.	102 Yes □ No
ļ	9. Name and Address of Curr	rent Registered Agent	B1	T klama	10. Name and Address of New Registers	ad Agent
	HNE, JOHN E JR.		6	Name		
	07 N. 65TH ST.		82	Street Addr	Iress (P.O. Box Number is Not Acceptable)	
IAI	MPA FL 33619		83			
			1	'		
			84	City		85 Zip Code
44 Pursuant	to the provisions of Sections 607.0	N 00 and 607 1508 Florida Stal	tuton, the abov	-2 camed corr	poration submits this statement for the purpose	
office or r	registered agont, or both, in the Shi	ate of Florida, Such change war	s authorized t	y the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	appointment as registered
l	im familiar with, and accept the ob-	ligations of, Section 607.0505, r	Florida Statute	s.		
SIGNATURE	Signature typed or posted same of regularity	sever celitas il anni jabli (N	C11 Registered A	son) signatura reguir	ired when reinstating) DATE	
12.		AND DIRECTORS	13.	lesu marine a re-	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	DELETE	1.1 TITLE		()	Change Addition
NAME	JOHN E, KUHNE J		1.2 NAME			
STREET ADDRESS	2107 N 65TH ST.		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL		1.4 CITY - ST - ZIP			
TITLE		☐ DELETE	2 1 TITLE			Change Addition
NAME			22 NAME			
STREET ADDRESS	ET ADDRESS		23 STREE	T ADDRESS		
CITY-ST-ZIP			2 4 CITY-	·S1-ZIP		
TITLE		☐ DELETE	31 TITLE		7.0	☐ Change ☐ Addition
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST ZIP			3.4. CITY-	ST-ZIP		
TITLE		L_ DECETE	4.1 HTLE			☐ Change ☐ Addition
NAME			4. 2 NAME	j		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5 2 NAME			
STREET ADORESS			5 3 STREE	T ADORESS		
CITY-ST-ZIP			5.4 CITY - 5	ST-ZIP		
TITLE		DELETE	6 1 TITLE			☐ Change ☐ Addition
NAME Í	Ì		6.2 NAME	1		

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 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 altachment with my address

63 STREET ADDRESS