

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90025 031 ***150.00

DOCUMENT # P95000043781

1. Entity Name

NAPLES MOVING & STORAGE, INC.

Principal Place of Business

**642 7TH AVE. SOUTH
 NAPLES FL 34102-6737
 US**

Mailing Address

**642 7TH AVE. SOUTH
 NAPLES FL 34102
 US**

2. Principal Place of Business

4185 Corporate Square
 Suite, Apt. #, etc.

3. Mailing Address

4185 Corporate Square
 Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

65-0391294

Applied For

Not Applicable

Zip

34104

Country

Collier

Zip

34104

Country

Collier

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SHORT, ROBERT V JR
 642 7TH AVE. SOUTH
 NAPLES FL 34102**

7. Name and Address of New Registered Agent

Name

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

4185 Corporate Square

City

Naples, FL

FL

Zip Code

34104

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Henriette Freng, Pres.

11/19/02

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **FRENG, HENRIETTE**
 CITY-ST-ZIP **642 7TH AVE. S.
 NAPLES FL 34102**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **SHORT, ROBERT V JR**
 CITY-ST-ZIP **642 7TH AVE. S.
 NAPLES FL 34102**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **4185 Corporate Square**
 CITY-ST-ZIP **naples, FL 34104**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **4185 Corporate Square**
 CITY-ST-ZIP **Naples, FL 34104**

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplement 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Henriette Freng

11/19/02

Date

941 591-4747

Daytime Phone #

CR2E034 (9/01)