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

PROFIT CORPORATION ANNUAL REPORT

1998



I LORIDA DEPARTMENT OF STATE

May 08 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000051929 (4)

REMOVAL INTERNATIONAL, INC.

Principal Place of Business Mailing Address					A DEGISTABLE AND LOTHER DEFINE AND LET A	INCOS MATAS AND S SIGNA SIGNA CALIN	I HEALD HOLL LABOR
3248 WEST 14TH AVE. 3248 WEST 14TH AVE. HIALEAH FL 33012 HIALEAH FL 33012					DO NOT WRITE	E IN THIS SPACE	
					3. Date Incorporated or Qualified		
L					06/30/1995		
└	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21 26					65-0613370		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Regulred
City & State		City & State	City & State		6. Election Campaign Financing	\$5.0	O, May Be
28					Trust Fund Contribution	☐ Adgie	to Fees
Zip	├ ' ├──_ ' ├ ──		Country		8. This corporation owes or has p		
24	25 29 30 30 9. Name and Address of Current Registered Agent				Personal Property Tax due Juni		∐ No
		ent Hegistered Agent	81	Marsa	10. Name and Address of New Ro	egistered Agent	
AROCHA, FORTUNATO V				Name			
3248 WEST 14TH AVE. HIALEAH FL 33012			82	Street A	ddress (P.O. Box Number is Not Accepta	ble)	
			00				
•			83				
			84	City		FL 85 Zi	ip Code
44 Pureupot	to the provisions of Sections 607.0	ing and 607 1608 Florida Statut	or the show	a-pamed (corporation submits this statement for the		n ite registered
office or r	regi ste red agent, or both, in the Sta	te of Florida. Such change was a	authorized by	the corpo	oration's board of directors. I hereby acce	pt the appointment	as registered
l agent. I a I	m familiar with, and accept the obl	igations of Section 607.0505, Fig	orida Statutes	3.			
SIGNATURE	Signature, typed or printed name of registered a	Thirty and the strong and the	C Desistered Ass	ent ninnate en e	equired when reinstalling)	DATE	
12.		ND DIRECTORS	13.	ini signature r	ADDITIONS/CHANGES TO OFFI		ODS IN 12
TITLE	PSD	DELETE	1.1 TITLE	··	ADDITIONO/CHANGES TO OTT	Change	
NAME	AROCHA, FORTUNATO V		1.2 NAME	ļ			
STREET ADDRESS	3248 WEST 14TH AVE.			ADBRECE			
	HALEAH FL 33012		1.3 STREET	į.			
CITY-ST-ZIP TITLE	FRALEARI PL 33012	DELETE	1.4 CITY - S 2.1 TITLE	1 - ZIP		Change	e Addition
NAME		occ.,	2.2 NAME	ļ			, La ridonien
STREET ADDRESS			23 STREET	ADDRESS			
			2.4 CITY-5	1			
CITY-ST-ZIP TITLE		DELETE	3.1 TITLE	SI - ZIP		Change	e Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY- S	- 1			
TITLE	☐ DELETE		4.1 TITLE			Change	e Addition
NAME		_	4. 2 NAME				_
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S				i
TITLE		☐ DELETE	5.1 TITLE			Change	e Addition
NAME			5.2 NAME	ļ			_
STREET ADDRESS			5.3 STREET	ADORESS			
CITY-ST-ZIP			5.4 CITY-S				
TITLE		DELETE	61 TITLE	LP		Change	e Addition
I NAME			62 NAME	-			
STREET ADDRESS	/		6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CiTY-S				
14. I hereby o	certify that the information supplied	with this filing does not qualify for	or the exemp	tion stated	in Section 119.07(3)(i), Florida Statutes. I	I further certify that the	he information
Indicated officer or	on this annual report or supplement director of the corporation or the re or Block 15 if sharped, or on an at	ital ánnual report is true and acc ceiver or trustee empowered to c	urate and the execute this	at my sign report as r	ature shall have the same legal effect as required by Chapter 607, Florida Statutes;	if made under oath; t and that my name a	that I am an appears in