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FILED

Apr 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000054839 (1)

1. Corporation Name

AMERICA'S PREFERRED MOVERS, INC.



Principal Place of Business

16525 S.W. 148TH AVENUE  
MIAMI FL 33187

Mailing Address

16525 S.W. 148TH AVENUE  
MIAMI FL 33187-1487

2. Principal Place of Business

21 105 Candace Drive

Suite, Apt. #, etc.

22 #101

City & State

23 Maitland, Florida

Zip

Country

24 32751

25

USA

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

06/27/1996

3a. Date of Last Report

4. FEI Number

65-0676903

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

SCHENKELBERG, KARL  
16525 S.W. 148 AVENUE  
MIAMI FL 33187

10. Name and Address of New Registered Agent

81 Name

Karl Schenkelberg

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

5969 Jessica Drive

83

84 City

Apopka

FL

85 Zip Code  
32703

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 Kathleen Schenkelberg

*Kathleen Schenkelberg*

4/18/97

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME SCHENKELBERG, KARL  
STREET ADDRESS 16525 S.W. 148TH AVENUE  
CITY-ST-ZIP MIAMI FL 33187

☐ DELETE

TITLE STD  
NAME SCHENKELBERG, KATHLEEN  
STREET ADDRESS 16525 S.W. 148TH AVENUE  
CITY-ST-ZIP MIAMI FL 33187

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD  
1.2 NAME Schenkelberg, Karl  
1.3 STREET ADDRESS 5969 Jessica Drive  
1.4 CITY-ST-ZIP Apopka, FL 32703

☒ Change ☐ Addition

2.1 TITLE STD  
2.2 NAME Schenkelberg, Kathleen  
2.3 STREET ADDRESS 5969 Jessica Drive  
2.4 CITY-ST-ZIP Apopka, FL 32703

☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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.

SIGNATURE: Kathleen Schenkelberg *Kathleen Schenkelberg* 4/18/97 (407) 830-7133

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Office

Daytime Phone #

CR2E034 (9/96)