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

PROFIT **CORPORATION ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P96000057816 (6)

AFFILIA	TED MOVING, INC.	•		(
Principal Place	e of Business	Mailing Address	· - · · · · · · · · · · · · · · · · · ·	I 10011001 110 MILIO ALIII 00(1) 80111 0	#11% 0010 1 #1111 #0001 10101 11010 04% 1011	
3951 N. FORSYTH ROAD 3951 N. FORSYTH ROAD			0			
G-7 C-7				DO NOT WRIT	E IN THIS SPACE	
WINTER PARK FL 32782 WINTER PARK FL 32782				3. Date incorporated or Qualified		
				07/05/1996		
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	16 FORSYTH Rd	26 27/6 F	orsyth Rd.	59-3400589	Not Applicable	
Suite, Apt.	113	Suite, Apt #, etc.	×	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	FI WINTER PARK.	City & State	AAK F-1	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	This corporation owes or has p		
24 327		29 32792	30 ORANGE		· · ·	
	9. Name and Address of Current			10. Name and Address of New R	egistered Agent	
	SSELL, PERCIVAL A		81 Name			
3951 N. FORSYTH ROAD			82 Street Ad	92 Street Address (P.O. Box Number is Not Acceptable)		
AMM.	ITER PARK FL 32792		83			
]						
			84 City		FL 85 Zip Code	
SIGNATURE	Signature, typed or printed name of registered agont	and tille if application (NO	TE Registered Agent signature rec	·	DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12 Change Addition	
NAME	RUSSELL, PERCIVAL	C) percit	1.1 TITLE 1.2 NAME		change Addition	
STREET ADDRESS	550 HATTAWAY DR.		1.3 STREET ADDRESS			
City-ST-ZiP	ALT. SPRINGS FL 32701		1.4 CITY - ST - ZIP			
TITLE	VP .	DELETE	2.1 TITLE		☐ Change ☐ Addition	
HAME	SMITH, LURLINE		2.2 NAME			
STREET ADDRESS	13455 N.E. 10TH AVE. #407		2.3 STREET ADDRESS			
CITY-ST-ZIP	N. MIAMI FL 33161	Decere	2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME STREET ADORESS			3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME		· ·	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
NAME			6.2 NAME		radiio	
STREET ADDRESS			6.3 STREET ADDRESS			
June Li Motoricos			0.5 SINCE I ADDINESS			

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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of on an attachment with an address.

FILED

May 07 1998 8:00am

Secretary of State