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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700002750 (2)

HERBY DIXON MOVING & STORAGE INC.

Principal Place of Business

Mailing Address

FILED Apr 17 1998 8:00am Secretary of State



P.O. BOX 211312 P.O. BOX 211312 ROYAL PALM BEACH FL 33421 ROYAL PALM BEACH FL 3341 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/10/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0719126 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zio Country Zφ Country 8. This corporation owes or has paid the current year intangible 25 29 Personal Property Tax due June 30. **y** No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DIXON, HERBY B 174 SAN PIPER AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **ROYAL PALM BEACH FL 33411** 83 84 City Zip Code 85 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 Horida. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent's griature required when roinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE x Change Addition DP DIXON, HERBY B NAME 1.2 NAME (N/A) P.O. BOX 211312 STREET ADDRESS 1.3 STREET ADDRESS ROYAL PALM BEACH FL 33421 CITY-ST-ZIP 1.4 C(1Y - S1 - ZIP DELETE Change Addition 21 TITLE DIXON, GEARY NAME 2.2 NAME 10117 PENSANCE LANE STREET ADDRESS 2.3 STREET ADDRESS **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE X Addition TITLE Change 3 1 TITLE Dixon, Wendy H. NAME 3.2 NAME (N/A) P.O.Box 211312 STREET ADDRESS 3.3 STREET ADDRESS Royal Palm Beach, Fl. 33421 CITY-ST-7IP 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 DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-S1-ZIP

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 or suppliemental 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 trusted employeed 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 open attachment with an address.