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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700002750

 Corporation 	n Name					`		
HERBY I	DIXON MOVING & STORAG	E INC.						
Principal Place of Business Mailing Address								,
P.O. BOX 211312 P.O. BOX 211312						. •		
ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 3341				41		DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						01/10/1997		i
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For
21		26				65-0719126		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired	7	Additional
27								equired
City & State	e	City & State				6. Election Campaign Financing	-	May Be to Fees
23	Country	28	Cou	intry		Trust Fund Contribution 8. This corporation owes the current year Ir		10 1 663
Zip	Country 25	29	30	ii ati y		Personal Property Tax.	Yes	SelNo
24	9. Name and Address of Curren					10. Name and Address of New Registered	l Agent	
a, manta ana manta at anno manta ana ana ana ana ana ana ana ana ana				81	Name			
DIXON, HERBY B				82	Street Address (P.O. Box Number is Not Acceptable)			
174 SAN PIPER AVENUE					Oli Cot Addit			
ROYAL PALM BEACH FL 33411				83				
				84	City		85 Zip	Code
						<u> </u>	LII	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida S	tatutes, the a	bove I hv 1	e-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	if changing its sintment as re	s registered egistered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505	, Florida Stat	utes.		• • • • • • • • • • • • • • • • • • • •		
SIGNATURE			WOTE D.			t when reinstating) DATE		 }
	Signature, typed or printed name of registered ager		13.	Agen	t signature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
12.	OFFICERS AND DIRECTORS DP DELETE		-	1.1 TITLE		The transfer and the tr	Change	☐ Addition
NAME	DIXON, HERBY B		1.2 N	1.2 NAME				
STREET ADDRESS	P O BOX 211312 N/A		1.3 8	1.3 STREET ADDRESS				ļ
CITY-ST-ZIP	ROYAL PALM BEACH FL 33421		14 C	14 CITY-ST-ZIP				
TITLE	D DELETE		E 2.1 TI	2.1 TITLE			☐ Change	· Addition
NAME	DIXON, GEARY			2.2 NAME				
STREET ADDRESS				2.3 STREET ADDRESS				
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411			2. 4 CITY+ST-ZIP			Change	Addition
TITLE	VST DELETE			3.1 TITLE		- man	Change	Addition
NAME	DIXON, WENDY H			3.2 NAME				
STREET ADDRESS	P O BOX 211312 N/A				ADDRESS			1
CITY-ST-ZIP	ROYAL PALM BEACH FL 33421			3.4. City-St-ZiP 4.1 Title			☐ Change	☐ Addition
TITLE		000001	4.21					
NAME STREET ADDRESS					ADDRESS			
				TY-S1				
CITY-ST-ZIP TITLE		☐ DELET		_			Change	Addition
NAME			5.2 N	AME		٠.		
STREET ADDRESS			5.3 S	TREET	T ADDRESS			}
CITY-ST-ZIP			5.4 C	ITY-S1	T- ZIP			
TITLE		☐ DELET	1				. ☐ Change	☐ Addition
NAME	1		6.2 N	AME	Ţ	,		

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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Mendy H. Dixon, Secretary

561-792-3211