

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

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Mar 02 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000029749 (3)**

1. Corporation Name

**ALL PRO VAN LINES, INC.**



Principal Place of Business <b>210 SE 9TH STREET HALLANDALE FL 33009</b>	Mailing Address <b>210 SE 9TH STREET HALLANDALE FL 33009</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 210 SE 5021 S.W. 25 ST.</b>		2a. Mailing Address <b>28 5021 S.W. 25 STR.</b>		3. Date Incorporated or Qualified <b>03/31/1997</b>	
Suite, Apt. #, etc. <b>22 - N/A -</b>		Suite, Apt. #, etc. <b>27 - N/A -</b>		4. FEI Number <b>65-0740431</b>	
City & State <b>23 W. Hollywood, FL.</b>		City & State <b>28 W. Hollywood, Fla.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>24 33023</b>		Zip <b>29 33023</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Country <b>25 BROWARD</b>		Country <b>30 Broward</b>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>BOWLES, ELIJAH III 210 SE 9TH STREET HALLANDALE FL 33009</b>				10. Name and Address of New Registered Agent	
				81 Name <b>Bowles, Elijah III</b>	
				82 Street Address (P.O. Box Number is Not Acceptable) <b>5021 S.W. 25 Street</b>	
				83 <b>West Hollywood,</b>	
				84 City <b>FL</b>	
				85 Zip Code <b>33023</b>	

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>CEO BOWLES, ELIJAH III 210 SE 9TH STREET HALLANDALE FL 33009</b> <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D BOWLES, ELIJAH 210 SE 9TH STREET HALLANDALE FL 33009</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<b>D Lisa D. Pinkney 5021 S.W. 25 Street West Hollywood, Fla. 33023</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>T BOWLES, MARIE 210 SE 9TH STREET HALLANDALE FL 33009</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<b>T Elijah Bowles III 5021 SW 25 Street West Hollywood, Fla. 33023</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S BOWLES, VICKIE 210 SE 9TH STREET HALLANDALE FL 33009</b> <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<b>S Lisa D. Pinkney 5021 S.W. 25 Street West Hollywood, Fla. 33023</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:

*Elijah Bowles III*

2/23/98

CR2E034 (10/97)