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

P97000046194 (1) DOCUMENT

FILED May 14 1998 8:00am Secretary of State

CHASE	: MUVING & SERVICE, INC	1.				
Principal Plac	e of Business	Mailing Addr	ess			
1914-1 BEAG		1914-1 BEACHWAY RD.				
JACKSONVIL	LE FL 32207	JACKSONVIL	JACKSONVILLE FL 32207			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
					-	05/23/1997
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number Applied For
21		ha	26			59-3452096 Not Applicable
Suite, Apt. #, etc.		·	Suite, Apt. #, etc.			SR 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & Stato		City & Sta	City & State			6, Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution
Zip	Country	Zφ		Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30	0		Personal Properly Tax due June 30. Yes No
	g. Name and Address of Curre	nt Registered Age	nt		T	10. Name and Address of New Registered Agent
	DFORD, MARK S			81	Name	
	14-1 BEACHWAY RD.				Street Ad	ddress (P.O. Box Number is Not Acceptable)
JA	CK SO NVILLE FL 32207					
				83		
				84	City	85 Zip Code
					L	FL 3 2p 5000
office or r	to the provisions of Sections 607,050 registered agent, or both, in the State	az and 607.1508, Fl e of Florida. Such cl	iori ca Statutes, hange was aul	, the above Ihorized by	e-named co / the corpor	orporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
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					3 3 333	rquired when reinstating) DATE
12.	Signature, typed or printed hather of registered ap OFFICERS AN	4D DIRECTORS	(NOTE: H	13.	eni signature req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELÉTE	1.1 TITLE		Change Addition
NAME	RADFORD, MARK S			1.2 NAME		
STREET ADDRESS	1914-1 BEACHWAY RD.			1.3 STREET	ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207		f	1.4 CITY-S	ì	j
TITLE			DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET	ADDRESS	
CITY-ST-ZIP				2. 4 CITY - S	ST-ZIP	
TITLE			DELETE	3.1 1IJLE		☐ Change ☐ Addition
NAME .				3.2 NAME		
STREET ADDRESS				3.3 STREFT	ADDRESS	
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP	
TITLE			DELETE	4.1 TITLE		Change Addition
NAME			,	4. 2 NAME	ļ	
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY - S	T-ZIP	
TITLE			DELETE	5.1 TITLE		Change Addition
HAME				5.2 NAME	1	
STREET ADDRESS				53 STREET	ADDRESS	
CITY-ST-ZIP				54 CITY - S	T-ZIP	
TITLE			DELETE	61 TITLE	İ	Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET	ADDRESS	1
CITY-ST-ZIP				6.4 CITY - S	T- ZIP	

14. 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 eath; 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.