FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS DOCUMENT # S51701 DOWSETT'S AMERICAN HOUSEHOLD MOVING & STORAGE OF BROWARD, INC.

FILED Apr 30 1998 8:00am Secretary of State



UllOtti	AIID; INC	, ,									
Principal Place of Business Mailing Address								i i berieth iar arrai man dan as-ar mar arrai)	eli Eidir (88:	
269 S.W. 33 S FT Lauderda		268 S.W. 33 STREET FT LAUDERDALE FL 33315				DO NOT WRITE IN THE	S SPACE				
								3. Date Incorporated or Qualified 05/09/1991			
2. Principal Place of Business				2a, Mailing Address				4. FEI Number Applied For			
21				26				65-0272299	Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State				City & State				6. Election Campaign Financing	\$5.00	May Be	
23				28				Trust Fund Contribution		to Fees	
Zip	, ·			Z _(p) Country				8. This corporation owes or has paid the current year Intangible			
24	25 9. Name and Address of Current		29			·	Personal Property Tax due June 30. Yes No				
			Current Registe				Nama	10. Name and Address of New Registered Agent			
	WSETT, CI				į'	۱'۵	Name				
268 S.W. 33 STREET Ft Lauderdale FL 33315						62	Street Addr	ress (P.O. Box Number is Not Acceptable)			
					Ī	63					
					1	84		F	L	Code	
office or re	e niste red an	ient orbolh in L	he State of Florida	7 1508, Florida <mark>Stat</mark> ut a. Such change was Section 607.0505, Fl	authorizéd	bν	the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing opointment a	its registered s registered	
SIGNATURE								4.44			
Signature, typed or printed name of registered agent and after diapplicable. (NOTE: Ro						Age	int signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ID DIDECTO	DS IN 12	
12.	OFFICERS AND					I.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change		
TITLE	_	TT, MICHAEL		C percie			j		ongo		
NAME	AAA AW AA ATDEET			1.2 NAME 1.3 STREET ADDRESS		ADDDECC					
STREET ADDRESS	ET LAUDEDDALE EL 9994E			1.4 (1)							
CITY-ST-ZIP	D	DENDACE IE		DELETE	2.1 TiT		1-21		Change	Addition	
NAME	DOWSETT, CLAUDIA			2.2						_	
						2.3 STREET ADDRESS					
STREET ADDRESS	ET LAUDEDDALE EL 20045					2. 4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE	TT ENODERIDACE TE GOOTS					31 TITLE			Change	☐ Addition	
NAME					3.2 NA						
STREET ADDRESS							ADDRESS				
-CITY-ST-ZIP					3.4. CI						
TITLE				DELETE	4.1 TIT				☐ Change	Addition	
NAME					4.2 NA	ME					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					4.4 CIT						
TITLE				DELETE	5.1 TIT				Change	Addition	
NAME					5.2 NA	ME					
STREET ADDRESS					5.3 \$16	REET	ADDRESS				
CITY-ST-ZIP					5.4 CIT	Y-\$	iT-ZIP				
TITLE				DELETE	6.1 111				Change	Addition	
NAME					6.2 NA	ME					
STREET ADDRESS					6.3 \$11	REET	ADDRESS				
CITY-ST-ZIP					6.4 CIT	Y-8	ST-ZIP				
44	المام الأقالة		and a site thin fil	ing doos oot ouglifu				Section 119.07(3\(\text{i})\) Florida Statules further	certify that th	o 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 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 chapged, or on an attachment with an address.