

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V46899

1. Corporation Name

KRUEGER & COMPANY MOVING COORDINATORS

Principal Place of Business

2755 E OAKLAND PARK BLVD.
SUITE 301
FORT LAUDERDALE FL 33306

Mailing Address

2755 E OAKLAND PARK BLVD.
SUITE 301
FORT LAUDERDALE FL 33306

FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90096 015 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/22/1992

4. FEI Number

65-0348798

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 2425 E. COMMERCIAL BLVD.

26 2425 E. COMMERCIAL BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 402

27 402

City & State

City & State

23 FT. LAUDERDALE, FL

28 FT. LAUDERDALE, FL

Zip Country

Zip Country

24 33308

25 USA

29 33308

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRUEGER, CAROL L
2755 E OAKLAND PARK BLVD.
SUITE 301
FORT LAUDERDALE FL 33306

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2425 E. COMMERCIAL BLVD.

83 SUITE 402

84 City

FL

85 Zip Code

33308

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

Carol L. Krueger CAROL L. KRUEGER

2/17/99

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 ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
KRUEGER, CAROL L.
2755 E OAKLAND PARK BLVD
FT. LAUDERDALE FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2425 E. COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33308

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Carol L. Krueger CAROL L. KRUEGER

Date

Daytime Phone #

2/17/99

94-
772-2997

CR2E034 (1/98)