

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90242 021 ***150.00

DOCUMENT # F00000001033

1. Entity Name
MOBILE MINI, INC.

| | |
|---|---|
| Principal Place of Business 1834 WEST THIRD STREET TEMPE AZ 85281 | Mailing Address 1834 WEST THIRD STREET TEMPE AZ 85281 |
|---|---|

915730



DO NOT WRITE IN THIS SPACE

| | |
|--|--|
| 2. Principal Place of Business 7420 South Kyrene Rd Suite, Apt. #, etc. Suite 101 City & State Tempe AZ Zip 85283 Country USA | 3. Mailing Address 7420 South Kyrene Rd Suite, Apt. #, etc. Suite 101 City & State Tempe AZ Zip 85283 Country USA |
|--|--|

| | |
|--|--|
| 4. FEI Number 86-0748362 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees
 Chg. Address only

| 11. OFFICERS AND DIRECTORS | |
|--|---------------------------------|
| TITLE CD NAME BUNGER, RICHARD E STREET ADDRESS 1834 WEST THIRD STREET CITY-ST-ZIP TEMPE AZ 85281 | <input type="checkbox"/> Delete |
| TITLE PD NAME BUNGER, STEVEN G STREET ADDRESS 1834 WEST THIRD STREET CITY-ST-ZIP TEMPE AZ 85281 | <input type="checkbox"/> Delete |
| TITLE VSTD NAME TRACHTENBERG, LAWRENCE STREET ADDRESS 1834 WEST THIRD STREET CITY-ST-ZIP TEMPE AZ 85281 | <input type="checkbox"/> Delete |
| TITLE V NAME KEELEY, DEBORAH K STREET ADDRESS 1834 WEST THIRD STREET CITY-ST-ZIP TEMPE AZ 85281 | <input type="checkbox"/> Delete |
| TITLE D NAME BERKNER, GEORGE E STREET ADDRESS 1834 WEST THIRD STREET CITY-ST-ZIP TEMPE AZ 85281 | <input type="checkbox"/> Delete |
| TITLE D NAME MARIUSIAK, RONALD J STREET ADDRESS 1834 WEST THIRD STREET CITY-ST-ZIP TEMPE AZ 85281 | <input type="checkbox"/> Delete |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP 7420 S. KYRENE RD. STE 101 Tempe, AZ 85283-4578 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP 7420 S. KYRENE RD STE 101 TEMPE, AZ 85283-4578 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP 7420 S. KYRENE RD., STE 101 Tempe, AZ 85283-4578 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP 7420 S. KYRENE RD, STE 101 Tempe, AZ 85283-4578 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deborah Keeley **Deborah K. Keeley** Date 480-894-6311
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/00)