

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001510

Entity Name: EVEREST STORAGE II, LLC

FILED
Apr 08, 2005
Secretary of State

Current Principal Place of Business:

155 N. LAKE AVE., #1000
PASADENA, CA 91101

New Principal Place of Business:

199 S. LOS ROBLES AVE.
SUITE 200
PASADENA, CA 91101

Current Mailing Address:

155 N. LAKE AVE., #1000
PASADENA, CA 91101

New Mailing Address:

199 S. LOS ROBLES AVE.
SUITE 200
PASADENA, CA 91101

FEI Number: 95-4737208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: EVEREST STORAGE MANA, GER II, LLC
Address: 199 S LOS ROBLES AVE., SUITE 440
City-St-Zip: PASADENA, CA 91101

Title: MGR (X) Delete
Name: EVEREST STORAGE MANG, ER, LLC
Address: 155 N. LAKE AVE., #1000
City-St-Zip: PASADENA, CA 81101

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: EVEREST STORAGE MANA, GER II, LLC
Address: 199 S LOS ROBLES AVE., SUITE 200
City-St-Zip: PASADENA, CA 91101

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CARL D. BECKMANN

PRES

04/08/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date