


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000004616**  
1. Entity Name  
**AXCESS STORAGE CONTAINER INC.**



Principal Place of Business  
**52 E 50 PLACE  
HIALEAH, FL 33013-1445**

Mailing Address  
**52 E 50 PLACE  
HIALEAH, FL 33013-1445**

**DO NOT WRITE IN THIS SPACE**



04112005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0835622</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**ESTEVEZ, TATIANA  
52 EAST 50 PLACE  
HIALEAH, FL 33013-1445**

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000313553  
04/18/05-80129-025 158.75

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ESTEVEZ, TATIANA 52 EAST 50 PLACE HIALEAH, FL 330131445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ESTEVEZ, ANGEL 52 E 50 PLACE HIALEAH, FL 330131445
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **TATIANA ESTEVEZ** **4/11/05** **305-331-5656**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #