FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A97000000680

98 DEC 22 AM 10: 43

AMERICAN MINI SELF STORAGE, LTD.							
Mailing Address	Principal Office Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
9106 12TH AVENUE NW BRADENTON FL 34209	9106 12TH AVENUE NW BRADENTON FL 34209		03/21/1997 3a. Date of Last Report 12/22/1997	\$150,000.00 5b. Amount of Capital Contributions in FLORIDA to date:			
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 65-0744505		Applied For Not Applicable	
City & State	City & State	City & State		7. Certificate of Status Desired		\$8.75 Additional Fee Required	
Zip Country	Zip	Zip Country		Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current Registered Agent		1	10. If changed, new Registered Agent/Office				
		Name		TO. Il Cilangeu, new Registered	Agenironice		
MARUCA, MARIA		Street Address (P.O. Box Number is Not Acceptable)					
9106 12TH AVENUE NW							
DRADENTON PL 34209	RADENTON FL 34209		Suite, Apt. #, etc.				
		City FL Zip Code					
10a. Pursuant to the provisions of sections 620.1051 are for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation	registered agent, or both, in the State of Flor						
SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT MUS	IS A CORPORATION, I	IMITED D ACTIV	PART	NERSHIP OR OTHEI	R BUSI	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo	il Partner	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
MARUCA ENTERPRISES, INC.	9106 12TH AVENUE NW		BRA	BRADENTON FL 34209		P97000025241 (8)	
G				500002 -01/08 *****5	735 799-1 26.25	1 -	
Notes Consultation MAY NOT	· h			- 1			
Note: General partners MAY NOT							
12. I do hereby certify that the information supplied with the Corporations from any liability of non-compliance with this annual report is true and accurate and that my significant and the control of the control	n Section 119.07(3)(k) in the event that the int gnature shall have the same legal effects as i	ormation suppli	ed is deeme	d exempt from public access. I further o	ertify that the	information indicated on	

SIGNATURE	
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Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number