

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90184 026 ***150.00

05/2800 AT

DOCUMENT # F01000003072

1. Entity Name
PJB STORAGE, INC.

Principal Place of Business

Mailing Address

26 MASELL ROAD
NEWINGTON CT 06111-5519

26 MASELL ROAD
NEWINGTON CT 06111-5519

2108 Bellcrest Court

B0016474



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2108 Bellcrest Court

3. Mailing Address

P.O. Box 210868

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Royal Palm Beach

City & State

West Palm Beach, FL

4. FEI Number

06-0646002

Applied For

Not Applicable

Zip

33411

Country

Palm Beach

Zip

33421

Country

Palm Beach

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOLZ, CHARLES S
5 HARVARD CIRCLE, SUITE 100
WEST PALM BEACH FL 33409

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: *Angela C. Darling*

(NOTE: Registered Agent signature required when reinstating)

DATE

1/15/02

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, 2002 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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	COCO, ALFRED S	
STREET ADDRESS	510 SOUTHWEST 113TH TERRACE	
CITY-ST-ZIP	PEMBROKE PINES FL 33025	
TITLE	V	<input type="checkbox"/> Delete
NAME	DARLING, ANGELA	
STREET ADDRESS	101 TWO ROD HIGHWAY	
CITY-ST-ZIP	WETHERSFIELD CT 06109	
TITLE	SD	<input type="checkbox"/> Delete
NAME	COCO, PAULINE B	
STREET ADDRESS	510 SOUTHWEST 113TH TERRACE	
CITY-ST-ZIP	PEMBROKE PINES FL 33025	
TITLE	T	<input type="checkbox"/> Delete
NAME	THIELKE, MARY	
STREET ADDRESS	148 WESTWOOD DRIVE	
CITY-ST-ZIP	WETHERSFIELD CT 06109	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NAPPI, ANNA	
STREET ADDRESS	10 PEBBLE COURT	
CITY-ST-ZIP	NEWINGTON CT 06111	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COCO, Anna	
STREET ADDRESS	2111 Bellcrest Court	
CITY-ST-ZIP	Royal Palm 71 33411	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2106 Bellcrest Court	
STREET ADDRESS	Royal Palm, 71	
CITY-ST-ZIP	33411	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2106 Bellcrest Court	
STREET ADDRESS	Royal Palm Beach 71	
CITY-ST-ZIP	33411	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2131 Bellcrest Court	
STREET ADDRESS	Royal Palm, 71	
CITY-ST-ZIP	33411	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Angela C. Darling V.P.

Date

Daytime Phone #

1/15/02

333-8716

CR2E034 (9/01)