## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H89332

(1)

FILED Feb 25 1998 8:00am Secretary of State

AMERI	Can national self sto	RAGE, INC.			
Principal Place	e of Business	Mailing Address		- I TRASON DION DENIO EGNOC INGO ESAND INDI DIE	ist Brott Brott Minte mithe hraft inde
701 S. HOMESTEAD BLVD. 701 S. HOMESTEAD BLV STE. 10 STE. 10 HOMESTEAD FL 33030 HOMESTEAD FL 33030			D.	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
		· · · · · · · · · · · · · · · · · · ·		12/11/1985	<del></del>
· ·	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
		26		59-2646203	Not Applicable
<b>├──</b>		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
		City & State	····		Fee Required
			6, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	7 <sub>I</sub> p	Country		
24	25		30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	Yes No
[27]	9. Name and Address of Curre		301	10. Name and Address of New Registe	
ST	ETTIN, HERBERT		B1 Name		
ONE BISCAYNE TOWER					
2 S. BISCAYNE BLVD. SUITE 3270			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33131			83		
1994	74m 1 E 00101				
			84 City		FL 85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.056 egistered agent, or both, in the State on familiar with, and accept the oblig		is, the above-named corputhorized by the corpora rida Statutes.  Registered Agent signature requi	poration submits this statement for the purportion's board of directors. I hereby accept the	use of changing its registered appointment as registered
12.	<del></del>	ID DIRECTORS	I 13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	CONCEPION, CARLOS		1.2 NAME		
STREET ADDRESS	TREET ADDRESS 999 PONCE DE LEON BLVD., STE. 1015		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL 33134		1.4 CITY - ST - ZIP		· .
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	CONDER, DELORES J		2.2 NAME		
STREET ADORESS	701 S. HOMESTEAD BLVD.,	STE. 10	2 3 STREET ADDRESS		ř. 2
CITY-ST-ZIP	HOMESTEAD FL 33030		2. 4 CITY-ST-ZIP		~
TITLE	D	DELETE	3 1 TITLE		Change Addition
NAME	HOOVER, JOHN W JR.		3.2 NAME		ļ
STREET ADDRESS	701 S. HOMESTEAD BLVD.,	STE. 10	3 3 STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD FL 33030		3.4. CITY-ST-ZIP		
TITLE	DP	DELETE	4.1 TITLE		Change Addition
NAME	Westpy, Edward		4 2 NAME		
STREET ADDRESS	701 S. HOMESTEAD BLVD.,	STE. 10	4.3 STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD FL 33030		4.4 CITY-ST-ZIP		
TITLE	DST	☐ DELETE	5.1 TITLE		Change Addition
NAME	MORGAN, JOHN H		5.2 NAME	•	
STREET ADDRESS	2399 HALPRENS WAY		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIDDLEBURG FL 32068		5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-\$T-ZIP			6.4 CHTY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attrichment with an address

SIGNATURE:

F. Wester E. Wester

1/cb/98 305-247-1

RE034 (10/97