SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

SELECTIVE STORAGE SYSTEMS, INC.

(9)

FILED Sep 16 1997 8:00am Secretary of State

Principal Place of Business		Mailing Address				1 18616111 DIN 14818 18111 NE414 MB140 B1	II 01011 B1041 01911 3	JOST OLDSA BIBLI GOĐI
6700 CROOKED PALM TERR MIAMI LAKES FL 33014		6700 CROOKED PALM TERR MIAMI LAKES FL 33014				DO NOT WRITE	IN THIS SPACE	Ē
						 Date Incorporated or Qualified 07/21/1988 	3a. Date of 05/01/1	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0062642	[Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	 			5. Certificate of Status Desired	1 1 -	.75 Additional Fee Required
City & State		Crity & State				Election Campaign Financing Trust Fund Contribution		5.00 May Be . dded to Fees
Zip 24 2	Country 25	Zip 29	30 Cou	ntry	,	8. This corporation owes or has pa Personal Property Tax due June		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
ALVAREZ, ANTONIO 6700 CROOKED PALM TERR			81	Name				
MIAMI LAKES FL 33014			82					
				83				
				84	FL T T T T T T T T T			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								

Signature, typed or printed name of registered agent and life if applicable (NOTE_Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change 1.1 TITLE TITLE ALVAREZ, ANTONIO NAME 1.2 NAME **6700 CROOKED PALM TERR** STREET ADDRESS 1.3 STREET ADDRESS MIAMI LAKES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change ☐ Addition DELETE 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLÉ NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change DELETE ☐ Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Addition TITLE NAME **5.2 NAME** 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I do 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 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 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 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 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 supplied with this filing does not exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes in Section 119.07(3)(i), Florida Statutes in Section 119.07(3)(i), Florida Statutes in Section 119.07(3)(i), Florida Statut

CITY-ST-ZIP

6.4 CITY - ST - ZIP