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

PROFIT CORPORATION ANNUAL REPORT

SECURE STORAGE, INC.



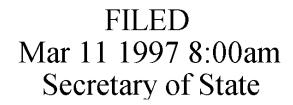
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

(9)

1997 DOCUMENT # L00559





Principal Place of Business Mailing Address						. I INDERIORI ANI DONIN DONE DENNY DELINE EN		INDIA MINIC MENSI	T1011 (001
4800 NW 15 A	NVE.	4800 NW 15 AVE.				ļ			
#F ET LAUDERDA	IF FI 33309	#F FT LAUDERDALE FL 3	3309-3781						
FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309						3. Date Incorporated or Qualified 07/03/1989	3a. Date of Last Report 04/23/1996		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	<u> </u>	1A	oplied For
21		26				65-0139883		No	ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27							equired
City & Stat	е	City & State				6. Election Campaign Financing	- 1		May Be
23	Country	28 Z _{IP}	T Co	untr	<u> </u>	Trust Fund Contribution	المالية المالية		to Fees
24	25	29	30	Car viti j	,	8. This corporation has liability for Florida Statutes	intangible Yes		. 199.032,
	9. Name and Address of Cu		[30]	Т		10. Name and Address of New Re			
MO	SS, MARVIN		***************************************	81	Name			_ 	
	1 SHERIDAN STEET			82	Cispot Addi	ess (P.O. Box Number is Not Acceptal	blo)		····
	TE 300			02	Street Addr	ess (P.O. Box Number is Not Acceptat	ле)		
	LLYWOOD FL 33021			83			·		
				84	City			lac Zio	Codo
				04	City		FL	85 Zip	Code
SIGNATURE	Signature Type to protect name of tegisters	d agent and title if applicable	(NOTE: Register			ed when reinstaling)	DATE		
12.		S AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	JERS AND		
TITLE	D DIBATTISTA, SALVATORE	☐ DELETE	1.11					Change	☐ Addition
NAME DEGEN MADE SOS	4800 NW 15 AVE., #F			AME	T ADDRESS				
STREET ADDRESS CITY-ST-ZIP	FT LAUDERDALE FL				ST-ZIP				
TITLE		DELETE	211		31-24			Change	Addition
NAME			1	AME				.	_
STREET ADDRESS			2.3 5	TREE	T ADDRESS				
CITY-ST-ZIP			2.41	CITY -	-ST-ZIP				
TITLE	777111	DELETE	3.1 7	ITLE				Change	Addition
NAME.			3.21	IAME	ľ				
STREET ADDRESS			335	TREE	T ADDRESS				
CHY-ST-7F					-ST-ZIP				-
TPLE		☐ DELETE	4.1 1			•		∐ Change	Addition
NAME			•	NAME	1				
STREET ADDRESS					T ADDRESS				
CITY - S1 - ZIP TITLE		DELETE	517	_	ST-ZIP			Change	Addition
NAME		La sere it	1	IAME	Y				7.00.00
STREET ADDRESS					T ADDRESS				
CITY-ST-74P					ST-ZIP				
TITLE		☐ DELETE	6.11		w. 411			☐ Change	☐ Addition
NAME				AME				-	
STREET ADORESS					T ADDRESS	1			
CITY-ST-ZIP					ST-ZIP	i			
14 Lda bara	be partiful that the information our	williad with this filips dose not a				t in Section 119 07/3\(\)\ Florida Statute	s I furtho	contify that	the

I do hereby certify that the informat information indicated on this annua I am an officer or director of the co appears in Block 12 or Block 13 if exemption stated in Sectron 119.07(3)(i), Florida Statutes. I further certify that the courate and that my signature shall have the same legal effect as if made under oath; that regule this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: