


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90232 008 ****50.00

DOCUMENT # L03000001199	
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1. Entity Name
CORTEZ STORAGE, LLC

Principal Place of Business
8915 W. CORTEZ ROAD
BRADENTON, FL 34210-2208

Mailing Address
8915 W. CORTEZ ROAD
BRADENTON, FL 34210-2208

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06302004 Chg-LLC CR2E083 (10/03)

4. FEI Number

32-0051831

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301-0000

7. Name and Address of New Registered Agent

Name Ronald A. Calleja

Street Address (P.O. Box Number is Not Acceptable)
8915 W. CORTEZ ROAD

City BRADENTON

FL Zip Code 342102208

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ronald A. Calleja
Signature, typed or printed name of registered agent and title if applicable.

Ronald A. Calleja

7/14/04
DATE

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by September 8, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	CALLEJA, RONALD A	
STREET ADDRESS	8915 W. CORTEZ ROAD	
CITY-ST-ZIP	BRADENTON, FL 342102208	

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	CALLEJA, MICHAEL	
STREET ADDRESS	8915 W. CORTEZ ROAD	
CITY-ST-ZIP	BRADENTON, FL 342102208	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS / CHANGES

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Ronald A. Calleja
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Ronald A. Calleja 7/14/04 (24) 776-8981
Date Daytime Phone #