2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Jan 31, 2005 08:00 AM DOCUMENT # L03000006734 **Secretary of State** 1. Entity Name CORTEZ STORAGE II, LLC Principal Place of Business_ Mailing Address 8915 WEST CORTEZ ROAD 8915 WEST CORTEZ ROAD BRADENTON, FL 34210-2208 BRADENTON, FL 34210-2208 01242005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 31-1818892 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE CALLEJA, RONALD A 8915 W CORTEZ RD BRADENTON, FL 34210-2208 IN THIS SPACE 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, typed or primed name of registered agent and trile if applicable. (NOTE: Registered Agent sygnature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGRM TITLE CORTEZ STORAGE, LLC MALE 1/00000206764 STREET ADDRESS 8915 W CORTEZ ROAD 02/01/05-80018-016 50.00 CITY-ST-ZIP **BRADENTON, FL 342102208** TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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. CONALD A. GALLEIA