4-23-97 B-5246 -C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L47630

(3)

A-1 STOR-A-FILE, INC.

FILED Apr 23 1997 8:00am Secretary of State

| A 1 0 10 | on a fill, ino. | | | | | THE CONTROL OF A CO | ALAN ATAN ATAN ANDE | <u> B(B) B(B) </u> |
|---|---|---|----------------|---|------------------------|--|----------------------------|---|
| Principal Plac | e of Business | Mailing Address | | | | | | í Blaid Blaid Iabl |
| MANICHAEL R. BRUENS | | %MICHAEL R. BRUENS | | | | | | |
| 250 LOCK ROAD | | 250 LOCK ROAD | | | | | | |
| DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 3344 | | | FL 33442-151 | 2-1516 | | | т | |
| Delevie et D | 1 | | | | | 3. Date Incorporated or Qualified 01/30/1990 | 3a. Date of Li 06/04/19 | |
| | lace of Business | 2a, Mailing Address | } | | | 4. FEI Number | _ | Applied For |
| 26 | | | | | | 65-0174731 | | Not Applicable |
| 27 | | | ·. | | | Certificate of Status Desired | | 75 Additional se Required |
| City & Stat | 8 | City & State | | | | 6. Election Campaign Financing | | .00 May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | ded to Fees |
| Zip | Country | Zip | | ountry | | a. This corporation has liability for in | | |
| 24 | 25 | 29 | 30 | | | | Yes 🖾 No | |
| | g. Name and Address of Curre | nt Registered Agent | | - | | 10. Name and Address of New Reg | Istered Agent | |
| | JENS, MICHAEL R. | | | 81 | Name | | | |
| 250 LOCK ROAD | | | | 82 | Street A | ddress (P.O. Box Number is Not Acceptabl | e) | |
| DEERFIELD BEACH FL 33442 | | | | - | | | | |
| | | | | 83 | | | | |
| | | | | 84 | City | | 85 | Zip Code |
| 44 Purcuant | to the provisions of Sections 607.05 | 02 and 607 1509 Florida | Palutan tha | | nome d | | FL °° | |
| 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 | | | | | | | | ing its registered it as registered |
| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered ag | oon; and tile if applicable | (NOTE: Booish | oved Aner | t signature n | equired when reinstating) | DATE | . <u> </u> |
| 12. | | ND DIRECTORS | 13 | | it organization of the | ADDITIONS/CHANGES TO OFFICE | | TORS IN 12 |
| TITLE | D | ☐ DELET | | TITLE | | | ☐ Cha | |
| NAME | PISER, PETER J. | | 1.2 | NAME | | | | |
| STREET ADDRESS | 250 LOCK ROAD | 1.3 STREET ADDR | | ADDRESS | | | 1 | |
| CITY-ST-ZIP | <u>DEERFIELD BEACH FL</u> | | 1.4 | 1.4 CITY-ST-ZIP | | | | İ |
| TITLE | D | ☐ DELET | E 21 | TITLE | | | Cha | nge Addition |
| NAME | BRUENS, MICHAEL R. | | 22 NAME | | 1 | | | |
| STREET ADDRESS | 250 LOCK ROAD | | 23 | STREET A | ADDRESS | * . | | |
| CITY-ST-ZIP | DEERFIELD BEACH FL | | | 4 CITY-SI | - ZIP | | | |
| TITLE | D SILIOTING II | ☐ DELE! | DELETE 31 TITI | | | | ☐ Cha | nge L_ Addition |
| NAME | PISER, TIMOTHY H. | | | NAME | | | | |
| STREET ADDRESS | 250 LOCK ROAD | | | STREET | | | | 1 |
| CITY-ST-ZIP TITLE | DEERFIELD BEACH FL | DELET | | . CITY-SI TITLE | | | Chai | noo I delilio |
| NAME | BRUENS, MICHAEL P. | C) better | | | | | La Cital | nge 🔲 Addition |
| STREET ADDRESS | 250 LOCK ROAD | | | NAME | DDBEEC | Burns, michael P. 250 Lock Road | | |
| CITY-ST-ZIP | DEERFIELD BEACH FL | | | 4.3 STREET ADDRI 4.4 CITY - ST - ZIP | | Deerfield Beach, FL | | |
| TITLE | D | DELET | | TITLE | - 411 | uca hela baca, i-c | ☐ Chai | nge Addition |
| NAME | BOWSER, TIMOTHY A. | | | NAME | | | | |
| STREET ADDRESS | 250 LOCK ROAD | | | STREET A | DDRESS | | | |
| CITY-ST-ZIP | DEERFIELD BEACH FL | | | CITY-ST | | | | |
| TITLE | | ☐ DELET | | TITLE | | | Char | nge Addition |
| NAME | | | 6.2 | NAME | | | | |
| STREET ADDRESS | | | 6.3 | STREET A | DDRESS | | | |
| CITY-ST-ZIP | | | 6.4 | CITY-ST | ŽIP | | | |
| wa I do borob | as a gettier than taken independence as a sub-li- | and the first and the state of | . CI C al | | | | | |

4. 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 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 the properties 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 the properties of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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954.475-0418