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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996			PECORPORATIONS				
DOCUN 1. Corporation	MENT# L	51421	(0)					
•	onal mini stora:	ge kendale	LAKES, INC.					
Principal Place o	of Business	Ma	iling Address	· · · · · · · · · · · · · · · · · · ·	A HEBURAL OUR BURST HOUR FIRM I	HOU IIII DHAK	UIUII BIUII B	IEN BIEN BIBN IEBN
6327 EDGEWATER DR			6327 EDGEWATER					
ORLANDO F	FL 32810		ORLANDO FL 32810	0				
			×		3. Date incorporated or Qualified 02/20/1990	3a. Dat	e of Last F 04/11/ 1	
 Principal Place 	ce of Business	<u></u>	Mailing Address		4. FEI Number 65-0184062		├-	Applied For
1] Suite, Apt. #,	, etc.	26	Suite, Apt. #, etc.					Not Applicable Additional
2		27			5. Certificate of Status Desired			Pequired
Oily & State		28	City & State		6. Election Campaign Financing			0 Мау Ве
7p	Country			Country	Trust Fund Contribution 8. This corporation has liability for			199.032
4	[25]	29		30	Florida Statutes	I ₹No		100.002,
	9. Name and Address	of Current Regist	ered Agent	417.	10. Name and Address of New I	Registered	Agent	
CUADE	D BUNNID I			81 Name				
	r, ronald j Dgewater dr			82 Street A	ddress (P.O. Box Number is Not Acceptal	ole)		
	DO FL 32810			83				
				04 04				n L'odo
11. Pursuant to or registere	the provisions of Sections dagont, or both, in the Sta	607.0502 and 607 ate of Florida, Such	.1508, Florida Statut change was authorit	84 City Ites, the above-named concided by the corporation's to	poration submits this statement for the pu	rpose of ch	_ ' '	p Code registered office
SIGNATURE	lgi atuel tyred or printed name of re-	gissonais agra Land tille it ap	ş licabe (No	1 1	rporation submits this statement for the pulpoard of directors. I hereby accept the app	FL rpose of ch cointment as	_ ' '	,
SIGNATURE SI	lgi atuel tyred or printed name of re-		şlicabe (No TORS	ites, the above-named cor- ized by the corporation's to is. OTE: Registered Agent's guature re-		rpose of ch ointment as trate	anging its is registered	registered office diagent. I am
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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 changed, or on an attachment with an address. SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR

2-14-96 (407)297-3683