

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 14 PH 4:19

DOCUMENT # L56517 (0)
1. Corporation Name
EXECUTIVE RECORDS STORAGE & RETRIEVAL, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 03/07/1990	3a. Date of Last Report 03/17/1994
4. FEI Number 65-0182604	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 2000 AVENUE "P" SUITE 15 RIVIERA BEACH FL 33404		2a. Mailing Address 2000 AVENUE "P" SUITE 15 RIVIERA BEACH FL 33404	
21	26	22	27
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
23	28	24	29
City & State		City & State	
25	30	29	30
Zip	Country	Zip	Country

9. Name and Address of Current Registered Agent

**FRIEDMAN, STEVEN
2000 AVENUE "P"
SUITE 14
RIVIERA BEACH FL 33404**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

* SIGNATURE _____ DATE _____
Signature (Type or printed name) of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	SAYRE, ROBERT
STREET ADDRESS	2000 AVE P SUITE 4
CITY - ST - ZIP	RIVIERA BEACH FL
TITLE	S
NAME	FREDRICKS, ROBERT A
STREET ADDRESS	2000 AVENUE P STE 15
CITY - ST - ZIP	RIVIERA BEACH FL 33404
TITLE	V
NAME	ABRAMS, MARC
STREET ADDRESS	2000 AVE P SUITE 4
CITY - ST - ZIP	RIVIERA BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 changed, or on an attachment with an address.

SIGNATURE: *Robert J. Abrams* **4/11/95** **407-881-7997**
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date (Type Here)