2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000045257 1. Entity Name E.S.B. STORAGE, INC.			Secretary of State				
1325 PONC	e of Business E DE LEON DR RDALE, FL 33316	Mailing Address 1325 PONCE DE LEON DR FORT LAUDERDALE, FL. 3331	6				
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n 194 1922			to the Josephine	5. Certificate	of Status Desired		5 Additional equired
	6. Name and Address of Current R	egistered Agent		-		1945 - 194 - 1 4	****** ********** * ****
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1325 PONCE DE LEON DR FORT LAUDERDALE, FL 33316				HA VOLES U PROLETIVO	Pro Pro Cije 🕟		
TOTAL ENGLES IN LEGIT COSTS					THIS SP	ACE	
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 Signature, typed or printed reares of registered agent and title if applicable (NOTE Registered Agent algoriture required when relinatizing) DATE							
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	E NOW!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00			led to Fees	OTA 19409.	_OOOOO _OO	0 130.13
10.	OFFICERS AND D	IRECTORS				·	
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CITY-ST-ZIP	partifications information accounting the state of	is filing stone and muntile for the ann		ction 110 07/3Vi	name and the contract of the c	further certify the	t the information
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							

MIGHATURE AND TYPED OR PRINTED HAME OF MICHING OFFICER OR DIRECTOR