

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033970

FILED  
Jan 06, 2004  
Secretary of State

**Entity Name:** HOME & BUSINESS STORAGE SOLUTIONS, INC.

**Current Principal Place of Business:**

1933 NW 40 CT  
LIGHTHOUSE POINT, FL 33064

**New Principal Place of Business:**

1933 NW 40 CT  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

1933 NW 40 CT  
LIGHTHOUSE POINT, FL 33064

**New Mailing Address:**

1933 NW 40 CT  
POMPANO BEACH, FL 33064

**FEI Number:** 74-3035023

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

A1A CORPORATE SERVICES INC.  
92 SADBERRY ROAD  
QUINCY, FL 323510000 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ONEILL, BRIAN  
Address: 2760 NE 52ND STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: DVTS ( ) Delete  
Name: ONEILL, RACHEL  
Address: 2760 NE 52ND STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVTS (X) Change ( ) Addition  
Name: ONEILL, RACHEL  
Address: 2760 NE 52ND STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** BRIAN ONEILL

PRES

01/06/2004

Electronic Signature of Signing Officer or Director

Date