


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 19, 2004 8:00 am**  
**Secretary of State**

02-19-2004 90033 009 \*\*\*150.00

DOCUMENT # P02000054538

1. Entity Name  
 AIR & SEA STORAGE, INC.



Principal Place of Business 4311 CRYSTAL LAKE DRIVE SUITE #216 POMPANO, FL 33064	Mailing Address 4311 CRYSTAL LAKE DRIVE SUITE #216 POMPANO, FL 33064
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2. Principal Place of Business 916 S.E. 17 <sup>th</sup> Street	3. Mailing Address 916 S.E. 17 <sup>th</sup> Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Deerfield Beach, FL	City & State Deerfield Beach, FL
Zip 33441	Country



02142004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent

SMALLEY, STEPHAN R  
 4311 CRYSTAL LAKE DRIVE  
 SUITE #216  
 POMPANO, FL 33064

4. FEI Number  
02-0613578

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
916 S.E. 17<sup>th</sup> Street

City  
Deerfield Beach FL Zip Code  
33441

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PVST	<input type="checkbox"/> Delete	TITLE SMALLEY, STEPHAN R	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SMALLEY, STEPHAN R		NAME SMALLEY, STEPHAN R	
STREET ADDRESS 4311 CRYSTAL LAKE DRIVE - #216		STREET ADDRESS 916 S.E. 17 <sup>th</sup> Street	
CITY-ST-ZIP POMPANO, FL 33064		CITY-ST-ZIP Deerfield Beach, FL 33441	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: St Smalley Steve Smalley 2/16/04 954-520-8798

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #