

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034025

FILED
May 01, 2006
Secretary of State

Entity Name: MIMS U.S. 1 MINI STORAGE, INC.

Current Principal Place of Business:

3755 U.S. HIGHWAY 1
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

3755 U.S. HIGHWAY 1
MIMS, FL 32754

New Mailing Address:

FEI Number: 20-2459331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASILESKI, CARL
507 PALM AVENUE
TITUSVILLE, FL 32796 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMAGE, DAVID
Address: 1830 TOMATO FARM ROAD
City-St-Zip: MIMS, FL 32754

Title: VP () Delete
Name: RAMAGE, CYNTHIA
Address: 1830 TOMATO FARM ROAD
City-St-Zip: MIMS, FL 32754

Title: T () Delete
Name: RAMAGE, CYNTHIA
Address: 1830 TOMATO FARM ROAD
City-St-Zip: MIMS, FL 32754

Title: S () Delete
Name: RAMAGE, CYNTHIA
Address: 1830 TOMATO FARM ROAD
City-St-Zip: MIMS, FL 32754

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID RAMAGE

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date