

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2006 8:00 am**  
**Secretary of State**

04-14-2006 90126 008 \*\*\*158.75

DOCUMENT # P05000132212

1. Entity Name  
PREMIER STORAGE SOLUTIONS, INC



Principal Place of Business  
1696 OLD OKEECHOBEE ROAD  
# 3-B  
WEST PALM BEACH, FL 33409 US

Mailing Address  
1696 OLD OKEECHOBEE ROAD  
# 3-B  
WEST PALM BEACH, FL 33409 US

2. Principal Place of Business  
4128 Westlake Dr. S.E.  
Suite, Apt. #, etc.  
V.I.C.

3. Mailing Address  
4128 Westlake Dr. S.E.  
Suite, Apt. #, etc.  
V.I.C.

City & State  
West Palm Beach FL  
Zip  
33407

City & State  
West Palm Beach FL  
Zip  
33407

03212006 Chg-P CR2E034 (11/05)

4. FEI Number  
07-0751662

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

DELISI, MARTIN V  
4361 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
2000 PCA BLVD  
Suite 3206  
City  
Palm Beach Gardens, FL Zip Code  
33427

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
BROWN, DAVID A  
17661 BRIDLE LANE  
JUPITER, FL 33478 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VP  
HORNER, JOHN F  
316 LEEWARD DRIVE  
JUPITER, FL 33477 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: John F. Horner JOHN F. HORNER 4/10/06 561-792-3211  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #