FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harrls

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000075072

XTRA STORAGE EAST, INC.

		•					
Principal F	Place	of B	110	ine	ee	-	

999 BRICKELL AVENUE SUITE 800

Mailing Address

999 BRICKELL AVENUE SUITE 800

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90029 031 ***150.00



MIAMI FL 3313	1	MIAMI FL 33131		DO NOT WRITE IN THIS SPACE
US		US		3. Date Incorporated or Qualifed
			•	10/26/1993
2 Princinal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
· ·	index of Business	26		65-0450527 Not Applicable
21 Suita Ant	W. 444	Suite, Apt. #, etc.		\$8.75 Additional
Suite, Apt.	#, etc.	<u> </u>		5. Certificate of Status Desired Fee Required
22	<u> </u>	City & State		
City & Stat	: e	<u> </u>		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	_ 25	29 30	<u> </u>	Personal Property Tax. Yes No
	9. Name and Address of Current			10. Name and Address of New Registered Agent
		4 8 3 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	81 Name	e
YAR	US, GARY J		82 Street	et Address (P.O. Box Number is Not Acceptable)
999	BRICKELL AVE		62 Silee	at Address (F.O. Dox Number is not Acceptable).
800	1-		83	
	MI FL 33131	CHENCES		· 一种,一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一
		•	84 City	85 Zip Code (1911)
				FE
11. Pursuant	to the provisions of Sections 807.0502	and 607.1508, Florida Statutes, Florida: Such change was auth	the above-named orized by the con	ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and copt the obligation	ons of Section 607.0505, Florida	Statutes.	
SIGNATURE	1/2	H CM	79 丁.	-1mus 1/9/99
SIGNATIONE	Signature, typed or printed hame of registered agent a	and true if applicable. (NOTE: Reg	gistered Agent signature	e required when reinstating) [7] (1) 10
12.	OFFICERS AND	PRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME		□ DELETE	1.1 TITLE 1.2 NAME	Change Addition
NAME	YARUS, GARY J	□ DELETE	1.2 NAME	
NAME STREET ADDRESS	YARUS, GARY J 999 BRICKELL AVE STE 800	U DELETE	1.2 NAME 1.3 STREET ADDRESS	
NAME STREET ADDRESS CITY-ST-ZIP	YARUS, GARY J		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ss
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14. 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 annual report or supplemental angual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE