

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000080259

Entity Name: A-PLUS STORAGE, INC.

FILED  
Jun 30, 2004  
Secretary of State

**Current Principal Place of Business:**

8350 SOUTH U.S. HIGHWAY ONE  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

8350 SOUTH U.S. HIGHWAY ONE  
PORT ST. LUCIE, FL 34952

**New Mailing Address:**

FEI Number: 65-0451711      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

FLOYD, MIKI P.  
2781 SE PINE VALLEY STREET  
PORT SAINT LUCIE, FL 34952      US

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

FLOYD, MIKI P.  
8350 SO. U.S. HIGHWAY ONE  
PORT SAINT LUCIE, FL 34952      US

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

06/30/2004

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: PVP      ( ) Delete  
Name: FLOYD, STEVEN T.  
Address: 2781 SE PINE VALLEY STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: ST      ( ) Delete  
Name: FLOYD, MIKI P.  
Address: 2781 SE PINE VALLEY STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

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 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: STEVEN T. FLOYD

Electronic Signature of Signing Officer or Director

PRES

06/30/2004

Date