PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING



J. 158 FLORIDA DEPARTMENT OF STATE

SECRETARY OF STATE

NSTATEMENT				Secretary of State Division of Corporations			04 OCT 25 AM 8:00				
ion Name											
							BEINIC	TAT	rcane	art /	30 N
2. Principal Office Address P.O. BOX 99				3. Mailing Office Address P.O. BOX 99			1PHGO		LIVIE		7-09
Suite, Apt. #, etc.				Suite, Apt. #, etc.			4. Date Incorp	orated or (Qualified	/1994	
City & State MELBOURNE, FL				City & State MELBOURNE, FL			5. FEI Number Applied For 593246766 Not Applicable				
099	Country	y`	Zip 329	02- 0099	Country USA		6. CERTIFICATE	OF STATU	S DESIRED 🗹		onal Fee required icate of Status
Suite, Apt. City MELBO appointed the	#, Etc. URNE		e above name	ed corporation.	· · · · · · · · · · · · · · · · · · ·	and accept the d		State FL on 607,050	Zip Code 32901 05 or 617.0503		808.75
and Street A	dresses	of Each Offic	er and/or Dire	ctor (Florida n	onprofit corporatio	ns must list at l	east 3 directors)				
Name of Officers and/or Directors				Street Address of Each Officer and/or Director			City / State / Zip				
ANDRE	W.RL	AIKIN	")B OX 99.			MELE	OURNE,	FL 3290 2.	0099
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	IMENT ion Name ORAGE O	IMENT # P9 ion Name ORAGE OF BR ORAGE OF BR Office Address X 99 , etc. URNE, FL O99 USA Name CURTIS R. M Street Address (P.C 1221 EAST N Suite, Apt. #, Etc. City MELBOURNE appointed the register Agent and Street Addresses Office	IMENT # P940000374 ion Name ORAGE OF BREVARD, I Office Address X 99 , etc. URNE, FL Country USA Name CURTIS R. MOSLEY, E Street Address (P.O. Box Numbe 1221 EAST NEW HAVE Suite, Apt. #, Etc. City MELBOURNE appointed the registered agent of th Agent and Street Addresses of Each Offic Officers and/or Dire ANDREW R. LAIKIN	IMENT # P94000037495 ion Name ORAGE OF BREVARD, INC. Office Address X 99 P.O. , etc. URNE, FL O99 USA Name CURTIS R. MOSLEY, ESQ. Street Address (P.O. Box Number is Not Accert 1221 EAST NEW HAVEN AVEN) Suite, Apt. #, Etc. City MELBOURNE appointed the registered agent of the above name Agent REGISTER ANDREW R. LAIKIN	STATEMENT SOCRE IMENT # P94000037495 ion Name ORAGE OF BREVARD, INC. Office Address X 99 , etc. City & State MELBOURNE URNE, FL O99 Country USA Zip 32902-0099 7. Name of CURTIS R. MOSLEY, ESQ. Street Address (P.O. Box Number is Not Acceptable) 1221 EAST NEW HAVEN AVENUE Suite, Apt. #, Etc. City MELBOURNE appointed the registered agent of the above named corporation Name of Officers and/or Directors ANDREW R. LAIKIN P. O	Secretary of State DIVISION OF CORPORATIO IMENT # P94000037495 Ion Name ORAGE OF BREVARD, INC. ORAGE	Secretary of State DIVISION OF CORPORATIONS IMPORT # P94000037495 ion Name Office Address X 99 P.O. BOX 99 P.O.	Secretary of State DIVISION OF CORPORATIONS IMPORT # P94000037495 Ion Name ORAGE OF BREVARD, INC. Ioffice Address X 99 P.O. BOX 99 P.O.	Secretary of State DIVISION OF CORPORATIONS IMENT # P94000037495 Ion Name ORAGE OF BREVARD, INC. IOffice Address X 99 P.O. BOX 99 MELE MELBOURNE Agent Registered agent of the above named corporation, am famillar with and accept the obligations of section 607.050 P.O. BOX 99 MELE ANDREW R. LAIKIN P.C. BOX 99 MELE MELBOURNE P.O. BOX 99 MELE	Secretary of State DIVISION OF CORPORATIONS OUT 2: IMENT # P94000037495 Ion Name ORAGE OF BREVARD, INC. Inc.	Secretary of State DIVISION OF CORPORATIONS DIMENT # P94000037495 Isin Name ORAGE OF BREVARD, INC. Suife, Apt. 4, etc. Suife, Apt. 4, etc. LOPICE Address X 99 P.O. BOX 99 etc. Suife, Apt. 4, etc. LOPICE Address X 99 P.O. BOX 99 LOCURTY Space Country Name CURTIS R. MOSLEY, ESQ. Size Address (P.O. Box Number is Not Accordable) Size Address (P.O. Box Number is Not Accordable) Suife, Apt. 4, etc. Size Address (P.O. Box Number is Not Accordable) Suife, Apt. 4, etc. Size Address (P.O. Box Number is Not Accordable) Size Address (P.O. Box Number is Not Accordable) Suife, Apt. 4, etc. Agent REGISTERED AGENT MUST SIGN REGISTERED AGENT MUST SIGN And Street Address of Each Officer and/or Director Officer and/or Director Officer and/or Director MELBOURNE, FL 32902 ANDREW R. LAIKIN P.O. BOX 99 MELBOURNE, FL 32902 MELBOURNE, FL 32902 ANDREW R. LAIKIN P.O. BOX 99 MELBOURNE, FL 32902 MELBOURNE, FL 32902 MELBOURNE, FL 32902

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PLAIKIN 10/20/04

Daytime Phone #

321-727-0000