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

Mailing Address 521 CYPRESS ROAD

2a. Mailing Address

26

VERO BEACH FL 32963-1724

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

appears in Block 12 or Block

SIGNATURE:

521 CYPRESS ROAD VERO BEACH FL 32963

21



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000017382 (9)

AERO OUTSIDE-INSIDE STORAGE, INC.

Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State: City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country This corporation has liability for inf ngible lax under s. 199.032, 24 25 29 30 Florida Statutes Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BERGER, HARRIS **521 CYPRESS ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32963 **B**3 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent it am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agont and title if applicable (NOTE: Registered Agent aignature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 OFFICERS AND DIRECTORS 13. Change Addition DELETE TIFLE 11 TITLE BERGER, HARRIS NAME 1.2 NAME **521 CYPRESS ROAD** 1.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 City-St 1.4 CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE THE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CPY SI-ZP 2 4 CITY-ST-ZIP DELETE ☐ Change Addition 31 TITLE TITLE 3.2 NAME NAMi 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP COY-ST ZIP DELETE Change Addition 4.1 TITLE THE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADOREST Diffi-St 7P 4.4 CITY-ST-ZIP DELETE Change Addition THE 51 TITLE NAMe 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY ST 5.4 C/TY - ST-Z/P DELETE Change Addition 6.1 TITLE HILL NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS 64 CITY - ST - ZIP CHY-51-701 14. I do 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 and cated on this amplial report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that fam an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FILED Apr 30 1997 8:00am Secretary of State

3a. Date of Last Report

Applied For

Not Applicable

07/22/1996



3. Date Incorporated or Qualified

03/01/1995

65-0584055

4. FEL Number