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Jun 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000066063 (4)**

1. Corporation Name
AMERICA'S STORAGE DEPOT, INC.

Principal Place of Business
11865 ROYAL PALM BLVD. #104
CORAL SPRINGS FL 33065

Mailing Address
11865 ROYAL PALM BLVD. #104
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/07/1996

2. Principal Place of Business
21 1400 E. HILLSBORO BLVD
Suite, Apt. #, etc.
22 100
City & State
23 DEERFIELD BCH FL
Zip 24 33441 Country 25

2a. Mailing Address
26 1400 E. HILLSBORO BLVD
Suite, Apt. #, etc.
27 #100
City & State
28 DEERFIELD BCH FL
Zip 29 33441 Country 30

4. FEI Number
65-0692050
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
POSNER, GARY D
11865 ROYAL PALM BLVD #104
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent
81 Name GARY POSNER
82 Street Address (P.O. Box Number is Not Acceptable) 21205 NE 34 AVE #906
83
84 City AVENTURA FL 85 Zip Code 33180

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☑ Change ☐ Addition
NAME	POSNER, GARY D		1.2 NAME	P.D.
STREET ADDRESS	11865 ROYAL PALM BLVD. #104		1.3 STREET ADDRESS	GARY POSNER 21205 NE 34 AVE #906
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY-ST-ZIP	AVENTURA FL 33180
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	100002545451
STREET ADDRESS			6.3 STREET ADDRESS	-06/03/98--01010--026
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***1111.25

CR2E034 (10/97)

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 annual 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.

_____ _____