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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 07 1998 8:00am

Secretary of State

Change

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000100789 (1)

R.C. STORAGE TWO, INC.

Principal Place of Business Mailing Address 2704 REW CIRCLE #105 2704 REW CIRCLE #105 OCOEE FL 34761 OCOEE FL 34761 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/26/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3481147 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 25 CARNGS 29 3476 9. Name and Address of Current Registered Agent Personal Property Tax due June 30. Yes KR1166 10. Name and Address of New Registered Agent Name COX, LAWRENCE E 2704 REW CIRCLE #105 82 Street Address (P.O. Box Number is Not Acceptable) **OCOEE FL 34761** 83 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statules, 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statules. **SIGNATURE** Signature, typed or printed name of registered agreet and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE PD Change Addition 1.1 TO LE COX, LAWRENCE E NAME 1.2 NAME 2704 REW CIRCLE #105 STREET ADORESS 1.3 STREET ADDRESS OCOEE FL 34761 CITY-ST-ZIP 1.4 CiTY - ST - ZiP TITLE DELETE Change Addition 2.1 10110 RABOUD, RONALD J NAME 2.2 NAME 2704 REW CIRCLE #105 STREET ADORESS 2.3 STREET ADDRESS **OCOEE FL 34761** CITY-ST-ZIP 2.4 CHY-S1-7IP DELETE Change Addition TITLE 3.1 DTLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - ST - ZiP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-S1-ZIP 5 4 CITY - ST - ZIP

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 suppliemental 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 or an attachment with an address.

61 11TLE

62 NAME

63 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

ONATURE .

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP