

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90142 017 ***150.00

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DOCUMENT # P98000065340

1. Corporation Name

STORAGE EXPRESS II, INC.

Principal Place of Business

4111 N. 42ND TERRACE
HOLLYWOOD FL 33021

Mailing Address

4111 N. 42ND TERRACE
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/22/1998

4. FEI Number

65-0853307

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

ASCHHEIM, ROBERT H
2999 N.E. 191 ST. PH-6
AVENTURA FL 33180

10. Name and Address of New Registered Agent

81 Name Reuben Elefant

82 Street Address (P.O. Box Number is Not Acceptable)
7400 West Oakland Park Blvd.

83

84 City Lauderhill,

FL

85 Zip Code
33319

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.

Reuben Elefant, President

4-15-99

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME ELEFANT, REUBEN
STREET ADDRESS 4111 N. 42ND TERRACE
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME Reuben Elefant
1.3 STREET ADDRESS 7400 West Oakland Park Blvd.
1.4 CITY-ST-ZIP Lauderhill, FL 33319

2.1 TITLE Vice President ☐ Change ☒ Addition
2.2 NAME Elyezer Hus
2.3 STREET ADDRESS 7400 West Oakland Park Blvd.
2.4 CITY-ST-ZIP Lauderhill, FL 33319

3.1 TITLE Treasurer ☐ Change ☒ Addition
3.2 NAME Edna Hus
3.3 STREET ADDRESS 7400 West Oakland Park Blvd.
3.4 CITY-ST-ZIP Lauderhill, FL 33319

4.1 TITLE Secretary ☐ Change ☒ Addition
4.2 NAME Bat-Sheva Elefant
4.3 STREET ADDRESS 7400 West Oakland Park Blvd.
4.4 CITY-ST-ZIP Lauderhill, FL 33319

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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, with all other like empowered.

SIGNATURE:

Reuben Elefant, President

4-15-99

(954) 749-0595

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #