

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90340 036 ***150.00

DOCUMENT # P99000004093

1. Entity Name

COLUMBIA STORAGE, INC.



Principal Place of Business

7220 NW 36 ST., STE 618
MIAMI FL 33166

Mailing Address

7220 NW 36 ST., STE 618
MIAMI FL 33166

2. Principal Place of Business

2871 SOMMERSET DRIVE
Suite, Apt. #, etc.
APT # H-410

3. Mailing Address

SAME
Suite, Apt. #, etc.

City & State

LAUDERDALE LAKES, FLORIDA

City & State

LAUDERDALE LAKES, FLORIDA

Zip

33311

Country

USA

Zip

33311

Country

USA

4. FEI Number

65-0891798

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CORONADO, NESTOR
7360 CORAL WAY
STE. 21
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

JOAO A. ARMEUN
Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE S ☐ Delete
NAME JULIANO, JAIRO
STREET ADDRESS 7220 NW 36 STREET, STE 618
CITY-ST-ZIP MIAMI FL 33166

TITLE P ☐ Delete
NAME BARRETO, ALBERTO E N
STREET ADDRESS 7220 NW 36 STREET, STE 618
CITY-ST-ZIP MIAMI FL 33166

TITLE T ☐ Delete
NAME DO REGO MONTEIRO, JOSE ANTONIO
STREET ADDRESS 7220 NW 36 STREET, STE 618
CITY-ST-ZIP MIAMI FL 33166

TITLE V ☐ Delete
NAME ARMELIN, JOAO ANTONIO A
STREET ADDRESS 7220 NW 36 STREET, STE 618
CITY-ST-ZIP MIAMI FL 33166

TITLE D ☐ Delete
NAME TORE, AFONSO EMILIO S
STREET ADDRESS 7220 NW 36 STREET, STE 618
CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☒ Change ☐ Addition
NAME JULIANO, JAIRO
STREET ADDRESS 2871 SOMMERSET DRIVE, APT H-410
CITY-ST-ZIP LAUDERDALE LAKES, FL 33311

TITLE P ☒ Change ☐ Addition
NAME BARRETO, ALBERTO E N
STREET ADDRESS 2871 SOMMERSET DRIVE, APT H-410
CITY-ST-ZIP LAUDERDALE LAKES, FL 33311

TITLE T ☒ Change ☐ Addition
NAME DO REGO MONTEIRO, JOSE ANTONIO
STREET ADDRESS 2871 SOMMERSET DRIVE, APT H-410
CITY-ST-ZIP LAUDERDALE LAKES, FL 33311

TITLE V ☒ Change ☐ Addition
NAME ARMELIN, JOAO ANTONIO A
STREET ADDRESS 2871 SOMMERSET DRIVE - APT H-410
CITY-ST-ZIP LAUDERDALE LAKES, FL 33311

TITLE D ☒ Change ☐ Addition
NAME TORE, AFONSO EMILIO S
STREET ADDRESS 2871 SOMMERSET DRIVE - APT H-410
CITY-ST-ZIP LAUDERDALE LAKES, FL 33311

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOAO A. ARMEUN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DIRECTOR

Date

Daytime Phone #