2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2005 8:00 am Secretary of State

DOCUMENT # P9900093694 1. Entity Name ROYAL PALM STORAGE, INC.					Secretary of State 04-04-2005 90073 017 ***158.75				
Principal Plac 751 PARK O SUITE 128 BOCA RATON	F COMMERCE DRIVE	Mailing Address 751 PARK OF COMMERCE DRIVE SUITE 128 BOCA RATON, FL 33487							
8/35.	LAKE WORTH B	3. Mailing Address 8135 LAKE WORTH RD		Rs					
Suite, Apt. #, etc.		Suite, Apt. #, etc. SUITE City's State			02032005	Chg-P	CR2E	034 (10/03)	
LAKE WORTH FI		LAKE WORTH FL			4. FEI Numbe 65-096		··		oplied For ot Applicable
3346	1 COURTS A	33461	Country US/	9	5. Certificate	of Status Desired		\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent					7. Name and	Address of New	Registered	Agent	
BARITA & COLMAN, LLP ATTN: NANCY B. COLMAN, ESQ.				Street Address (P.O. Box Number is Not Acceptable)					
150 EAST PALMETTO PARK ROAD, SUITE 750 BOCA RATON, FL 33432									
			City				FL	Zip Cod	le
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 Signature, typed or printed name of registered agent and title 4 applicable. (NOTE: Registered Agent aignature required when renstating) DATE									
	E NOWIII FEE 18 \$150.00 ay 1, 2005 Fee will be \$550.0	\$5. Adde	00 May Be ed to Fees						
TITLE	OFFICERS AND D		11.	1	ADDITIONS/	CHANGES TO OF	FICERS AN		
NAME STREET ADDRESS CITY-ST-ZIP	PECHTER, MARTIN 751 PARK OF COMMERCE DR 1: BOCA RATON, FL 33487	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition
TITLE	VP	☐ Delete	TITLE					☑ Change	☐ Addition
NAME STREET AODRESS CITY-ST-ZIP	PECHTER, JEFFREY 751 PARK OF COMMERCE DR 1: BOCA RATON, FL 33487	28	NAME STREET AODRESS CITY-ST-ZIP	8/3	35 LA	KE WO DORTH	RTH	RD-5	TE B
TITLE NAME	S BLOCK, STEPHEN E	☐ Delete	TITLE	!				Change	☐ Addition
STREET ADDRESS"	751 PARK OF COMMERCE DR 1	28:	NAME STREET ADDRESS			KE WO	RTH.	R_{2}	STE B
CITY-ST-ZIP	BOCA RATON, FL 33487	☐ Delete	CITY-ST-ZIP	LA	KE W	ORTH F	- 2	<u> 33467</u>	
NAME	BLOCK, STEPHEN E		TITLE NAME	0	1-1	1	11000	// /D	Addition C
STREET ADDRESS CITY-ST-ZIP	751 PARK OF COMMERCE DR 1: BOCA RATON, FL 33487	28	STREET ADDRESS CITY-ST-ZIP	2/	IS L	AKE L	FL	3346:	1
TITLE		☐ Delete	TITLE			-15.7.7		☐ Change	Addition
NAME Street address City-St-Zip			NAME STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					Change	Addition
NAME Street address.			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information									

12. Thereby 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:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/05 561-357-0121