

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000093699

1. Entity Name
NOB HILL STORAGE, INC.



Principal Place of Business

8135 LAKE WORTH RD
SUITE B
LAKE WORTH, FL 33467

Mailing Address

8135 LAKE WORTH RD
SUITE B
LAKE WORTH, FL 33467



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0960095

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COLMAN, NANCY B ESQ.
DREIER BARITZ & COLMAN
150 EAST PALMETTO PARK ROAD, SUITE 750
BOCA RATON, FL 33432

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IN THIS SPACE**

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PECHTER, MARTIN
STREET ADDRESS	751 PARK OF COMMERCE DR #128
CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE	VP
NAME	PECHTER, JEFFERY
STREET ADDRESS	8135 LAKE WORTH RD STE B
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	S
NAME	BLOCK, STEPHEN E
STREET ADDRESS	8135 LAKE WORTH RD STE B
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	T
NAME	BLOCK, STEPHEN E
STREET ADDRESS	8135 LAKE WORTH RD STE B
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/06 561-357-0121
Date Daytime Phone #